A bill to be entitled 1 2 An act relating to child protection and child welfare 3 services; amending s. 20.19, F.S.; requiring the 4 secretary of the department to appoint an Assistant 5 Secretary for Child Welfare; providing requirements 6 for such position; revising the duties, appointment, 7 and membership of community alliances; amending s. 8 39.001, F.S.; revising the purposes of ch. 39, F.S.; providing for the provision of services for medically 9 10 complex children; conforming cross-references; amending s. 39.01, F.S.; defining the terms "medical 11 neglect", "safety plan"; and "sibling"; revising the 12 definition of "diligent efforts by a parent"; 13 14 conforming cross-references; creating s. 39.2015, F.S.; requiring the Department of Children and 15 16 Families to conduct specified investigations using critical incident rapid response teams; providing 17 18 requirements for such investigations; providing requirements for the team; authorizing the team to 19 20 access specified information; requiring the 21 cooperation of specified agencies and organizations; 22 providing for reimbursement of team members; requiring 23 a report of the investigation; requiring the secretary 24 to develop specified guidelines for investigations and 25 provide training to team members; requiring the

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secretary to appoint an advisory committee; requiring a report from the advisory committee to the Secretary of Children and Families; requiring the secretary to submit such report to the Governor and the Legislature; amending s. 39.202, F.S.; authorizing access to specified records in the event of the death of a child which was reported to the department's child abuse hotline; creating s. 39.2022, F.S.; providing legislative intent; requiring the department to publish specified information on its website if the death of a child is reported to the child abuse hotline; prohibiting specified information from being released; providing requirements for the release of information in the child's records; prohibiting release of information that identifies the person who reports an incident to the child abuse hotline; amending 39.301, F.S.; authorizing the use of safety plans; providing requirements for use of safety plans; amending s. 39.303, F.S.; revising legislative intent; providing requirements for a child protection team that evaluates a report of medical neglect and assesses the health care needs of a medically complex child; creating s. 39.3068, F.S.; providing requirements for an investigation of medical neglect; amending s. 39.402, F.S.; requiring the department to

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make a reasonable effort to keep siblings together when they are placed in out-of-home care under certain circumstances; providing for sibling visitation under certain circumstances; amending s. 39.501, F.S.; requiring compliance with a safety plan to be considered when deciding a petition for dependency; amending s. 39.701, F.S.; requiring the court to consider contact among siblings in judicial reviews; authorizing the court to remove specified disabilities of nonage at judicial reviews; amending s. 39.802, F.S.; requiring a petition for the termination of parental rights to be signed under oath stating the petitioner's good faith in filing the petition; amending s. 383.402, F.S.; requiring the review of all deaths of children which occur in the state and are reported to the department's child abuse hotline; revising the due date for a report; providing a directive to the Division of Law Revision and Information; amending s. 402.40, F.S.; providing for a specialization through the certification process; creating s. 402.402, F.S.; providing education requirements for child protective investigators and child protective investigation supervisors; creating s. 402.403, F.S.; establishing a tuition exemption program for child protective investigators and

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supervisors; providing eligibility requirements; creating s. 402.404, F.S.; establishing a student loan forgiveness program for child protective investigators and supervisors; providing eligibility requirements; providing requirements for the program; amending s. 409.165; enhancing provision of care to medically complex children; amending s. 409.967; revising standards for Medicaid managed care plan accountability in regard to services for dependent children; creating part V of ch. 409, F.S.; creating s. 409.986, F.S.; providing legislative findings and intent; providing child protection and child welfare outcome goals; defining terms; creating s. 409.987, F.S.; providing for the procurement of community-based care lead agencies; providing requirements for contracting as a lead agency; creating s. 409.988, F.S.; providing the duties of a community-based care lead agency; providing licensure requirements for a lead agency; creating s. 409.998; providing for community based care oversight by community alliances; authorizing the establishment of direct-support organizations; creating s. 409.990, F.S.; providing general funding provisions; providing for a matching grant program and the maximum amount of funds that may be awarded; requiring the department to develop and

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implement a community-based care risk pool initiative; providing requirements for the risk pool; transferring, renumbering, and amending s. 409.16713, F.S.; transferring provisions relating to the allocation of funds for community-based lead care agencies; conforming a cross-reference; creating s. 409.992, F.S.; providing requirements for communitybased care lead agency expenditures; creating s. 409.993, F.S.; providing findings; providing for lead agency and subcontractor liability; providing limitations on damages; transferring, renumbering, and amending s. 409.1675, F.S.; transferring provisions relating to receivership from community-based providers to lead agencies; conforming crossreferences and terminology; creating s. 409.996, F.S.; providing duties of the department relating to community-based care and lead agencies; creating s. 409.997, F.S.; providing goals for the department and specified entities; requiring the department to maintain a comprehensive, results-oriented accountability system; providing requirements; requiring the department to establish a technical advisory panel; providing requirements for the panel; requiring the department to make the results of the system public; requiring a report to the Governor and

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the Legislature; creating s. 827.10, F.S.; defining terms; establishing the criminal offense of unlawful abandonment of a child; providing criminal penalties; providing exceptions; creating s. 1004.615, F.S.; establishing the Florida Institute for Child Welfare; providing the purpose of the institute; requiring the institute to contract and work with specified entities; providing duties and responsibilities of the institute; providing for the administration of the institute; requiring a report to the Governor and the Legislature by a specified date; providing for a task force and report; amending s. 1009.25, F.S.; exempting tuition and fees for specified child protective investigators and child protective investigation supervisors; amending s. 39.01, F.S.; conforming a cross-reference; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Present subsections (3) through (5) of section 20.19, Florida Statutes, are redesignated as subsections (4) through (6), respectively, a new subsection (3) is added to that section, and subsections (2) and (4) of that section are amended, to read:

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20.19 Department of Children and Families.—There is

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created a Department of Children and Families.

- (2) SECRETARY OF CHILDREN AND FAMILIES; DEPUTY SECRETARY.-
- (a) The head of the department is the Secretary of Children and Families. The secretary is appointed by the Governor, subject to confirmation by the Senate. The secretary serves at the pleasure of the Governor.
- (b) The secretary shall appoint a deputy secretary who shall act in the absence of the secretary. The deputy secretary is directly responsible to the secretary, performs such duties as are assigned by the secretary, and serves at the pleasure of the secretary.
 - (3) ASSISTANT SECRETARIES.-
 - (a) Child Welfare.-
- 1. The secretary shall appoint an Assistant Secretary for Child Welfare to lead the department in carrying out its duties and responsibilities for child protection and child welfare. The individual appointed to this position shall serve at the pleasure of the secretary.
- 2. The assistant secretary must have at least 7 years of experience working in organizations delivering child protective or child welfare services.
 - (b) Substance Abuse and Mental Health.-
- (c)1. The secretary shall appoint an Assistant Secretary for Substance Abuse and Mental Health. The assistant secretary shall serve at the pleasure of the secretary and must have

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expertise in both areas of responsibility.

- 2. The secretary shall appoint a Director for Substance Abuse and Mental Health who has the requisite expertise and experience to head the state's Substance Abuse and Mental Health Program Office.
 - (5) $\overline{(4)}$ COMMUNITY ALLIANCES.
- (a) The department shall, in consultation with local communities, establish a community alliance or similar group of the stakeholders, community leaders, client representatives and funders of human services in each county to provide a focal point for community participation and governance of community-based services. An alliance may cover more than one county when such arrangement is determined to provide for more effective representation. The community alliance shall represent the diversity of the community.
- (b) The duties of the community alliance include, but are not limited to:
- 1. Providing independent, community-focused, oversight of child protection and child welfare services and the local system of community-based care, as described in s. 409.998.
- 2.1. Joint planning for resource utilization in the community, including resources appropriated to the department and any funds that local funding sources choose to provide.
- 3.2. Needs assessment and establishment of community priorities for service delivery.

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01	<u> 4</u>	<u>1.</u> 3.	Determining	community	outcome	goals	to	supplement
02	state-	-requi	ired outcomes	5.				

- $\underline{5.4.}$ Serving as a catalyst for community resource development.
- $\underline{6.5.}$ Providing for community education and advocacy on issues related to delivery of services.
 - 7.6. Promoting prevention and early intervention services.
- (c) The department shall ensure, to the greatest extent possible, that the formation of each community alliance builds on the strengths of the existing community human services infrastructure.
- (d) The initial membership of the community alliance in a county shall be composed of the following, who shall be appointed by the entities they represent:
 - 1. A representative from the department.
 - 1.2. A representative from county government.
 - 2.3. A representative from the school district.
- 3.4. A representative from the county United Way.
- 219 <u>4.5.</u> A representative from the county sheriff's office,
 220 <u>unless the county sheriff's office is providing child protective</u>
 221 services.
- $\frac{5.6.}{6}$ A representative from the circuit court corresponding to the county.
- 224 $\underline{6.7.}$ A representative from the county children's board, if 225 one exists.

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- 7. An advocate for persons receiving child protection and child welfare services chosen by the secretary.
- (e) At any time after the initial meeting of the community alliance, the community alliance shall adopt bylaws and may increase the membership of the alliance to include the state attorney for the judicial circuit in which the community alliance is located, or his or her designee, the public defender for the judicial circuit in which the community alliance is located, or his or her designee, and other individuals and organizations who represent funding organizations, are community leaders, have knowledge of community-based service issues, or otherwise represent perspectives that will enable them to accomplish the duties listed in paragraph (b), if, in the judgment of the alliance, such change is necessary to adequately represent the diversity of the population within the community alliance service circuits.
- (f) A member of the community alliance, other than a member specified in paragraph (d), may not receive payment for contractual services from the department or a community-based care lead agency.
- (g) Members of the community alliances shall serve without compensation, but are entitled to receive reimbursement for per diem and travel expenses, as provided in s. 112.061. Payment may also be authorized for preapproved child care expenses or lost wages for members who are consumers of the department's services

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and for preapproved child care expenses for other members who demonstrate hardship.

- (h) Members of a community alliance are subject to the provisions of part III of chapter 112, the Code of Ethics for Public Officers and Employees.
- (i) Actions taken by a community alliance must be consistent with department policy and state and federal laws, rules, and regulations.
- (j) Alliance members shall annually submit a disclosure statement of services interests to the department's inspector general. Any member who has an interest in a matter under consideration by the alliance must abstain from voting on that matter.
- (k) All alliance meetings are open to the public pursuant to s. 286.011 and the public records provision of s. 119.07(1).

Section 2. Paragraph (o) is added to subsection (1) of section 39.001, Florida Statutes, and paragraph (k) of that subsection is amended, present paragraphs (f) through (h) of subsection (3) of that section are redesignated as paragraphs (g) through (i), respectively, and a new paragraph (f) is added to that subsection, and present subsections (4) through (11) of that section are redesignated as subsections (5) through (12), respectively, a new subsection (4) is added to that section, and paragraph (c) of present subsection (8) and paragraph (b) of present subsection (10) of that section are amended, to read:

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- 39.001 Purposes and intent; personnel standards and screening.—
 - (1) PURPOSES OF CHAPTER.—The purposes of this chapter are:
- (k) To make every possible effort, <u>if when</u> two or more children who are in the care or under the supervision of the department are siblings, to place the siblings in the same home; and in the event of permanent placement of the siblings, to place them in the same adoptive home or, if the siblings are separated <u>while under the care or supervision of the department or in a permanent placement</u>, to keep them in contact with each other.
- (o) To preserve and strengthen families who are caring for medically complex children.
- (3) GENERAL PROTECTIONS FOR CHILDREN.—It is a purpose of the Legislature that the children of this state be provided with the following protections:
- (f) Access to sufficient home and community-based support for medically complex children to allow them to remain in the least restrictive and most nurturing environment, which includes sufficient home and community-based services in an amount and scope comparable to those the child would receive in out-of-home care placement.
- (4) SERVICES FOR MEDICALLY COMPLEX CHILDREN.—The department shall maintain a program of family-centered services and supports for medically complex children. The purpose of the

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program is to prevent abuse and neglect of medically complex children while enhancing the capacity of families to provide for their children's needs. Program services must include outreach, early intervention, and provision of home and community-based services such as care coordination, respite care, and direct home care. The department shall work with the Agency for Health Care Administration and the Department of Health to provide needed services.

- (9) (8) OFFICE OF ADOPTION AND CHILD PROTECTION.
- (c) The office is authorized and directed to:
- 1. Oversee the preparation and implementation of the state plan established under subsection $\underline{(10)}$ and revise and update the state plan as necessary.
- 2. Provide for or make available continuing professional education and training in the prevention of child abuse and neglect.
- 3. Work to secure funding in the form of appropriations, gifts, and grants from the state, the Federal Government, and other public and private sources in order to ensure that sufficient funds are available for the promotion of adoption, support of adoptive families, and child abuse prevention efforts.
- 4. Make recommendations pertaining to agreements or contracts for the establishment and development of:
 - a. Programs and services for the promotion of adoption,

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support of adoptive families, and prevention of child abuse and neglect.

- b. Training programs for the prevention of child abuse and neglect.
- c. Multidisciplinary and discipline-specific training programs for professionals with responsibilities affecting children, young adults, and families.
 - d. Efforts to promote adoption.
 - e. Postadoptive services to support adoptive families.
- 5. Monitor, evaluate, and review the development and quality of local and statewide services and programs for the promotion of adoption, support of adoptive families, and prevention of child abuse and neglect and shall publish and distribute an annual report of its findings on or before January 1 of each year to the Governor, the Speaker of the House of Representatives, the President of the Senate, the head of each state agency affected by the report, and the appropriate substantive committees of the Legislature. The report shall include:
 - a. A summary of the activities of the office.
- b. A summary of the adoption data collected and reported to the federal Adoption and Foster Care Analysis and Reporting System (AFCARS) and the federal Administration for Children and Families.
 - c. A summary of the child abuse prevention data collected

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and reported to the National Child Abuse and Neglect Data System (NCANDS) and the federal Administration for Children and Families.

- d. A summary detailing the timeliness of the adoption process for children adopted from within the child welfare system.
- e. Recommendations, by state agency, for the further development and improvement of services and programs for the promotion of adoption, support of adoptive families, and prevention of child abuse and neglect.
- f. Budget requests, adoption promotion and support needs, and child abuse prevention program needs by state agency.
- 6. Work with the direct-support organization established under s. 39.0011 to receive financial assistance.

(11) (10) FUNDING AND SUBSEQUENT PLANS.

(b) The office and the other agencies and organizations listed in paragraph (10)(a)(9)(a) shall readdress the state plan and make necessary revisions every 5 years, at a minimum. Such revisions shall be submitted to the Speaker of the House of Representatives and the President of the Senate no later than June 30 of each year divisible by 5. At least biennially, the office shall review the state plan and make any necessary revisions based on changing needs and program evaluation results. An annual progress report shall be submitted to update the state plan in the years between the 5-year intervals. In

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order to avoid duplication of effort, these required plans may be made a part of or merged with other plans required by either the state or Federal Government, so long as the portions of the other state or Federal Government plan that constitute the state plan for the promotion of adoption, support of adoptive families, and prevention of child abuse, abandonment, and neglect are clearly identified as such and are provided to the Speaker of the House of Representatives and the President of the Senate as required above.

Section 3. Present subsections (42) through (76) of section 39.01, Florida Statutes, are redesignated as subsections (43) through (79), respectively, new subsections (42), (67) and (71) are added to that section, and subsections (10), (22), and (33) are amended, to read:

- 39.01 Definitions.—When used in this chapter, unless the context otherwise requires:
- (10) "Caregiver" means the parent, legal custodian, permanent guardian, adult household member, or other person responsible for a child's welfare as defined in subsection (48)
- (22) "Diligent efforts by a parent" means a course of conduct which results in a meaningful change in the behavior of a parent which a reduction reduces in risk to the child in the child's home to the extent that would allow the child may to be safely placed permanently back in the home as set forth in the

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case plan.

- (33) "Institutional child abuse or neglect" means situations of known or suspected child abuse or neglect in which the person allegedly perpetrating the child abuse or neglect is an employee of a private school, public or private day care center, residential home, institution, facility, or agency or any other person at such institution responsible for the child's care as defined in subsection (48) (47).
- (43) "Medical neglect" means the failure to provide or the failure to allow needed care as recommended by a health care practitioner for a physical injury, illness, medical condition, or impairment, or the failure to seek timely and appropriate medical care for a serious health problem that a reasonable person would have recognized as requiring professional medical attention. Medical neglect does not occur if the parent or legal custodian of the child has made reasonable attempts to obtain necessary health care services or the immediate health condition giving rise to the allegation of neglect is a known and expected complication of the child's diagnosis or treatment and:
- (a) The recommended care offers limited net benefit to the child and the morbidity or other side effects of the treatment may be considered to be greater than the anticipated benefit; or
- (b) The parent received conflicting medical recommendations for treatment from multiple practitioners and did not follow all recommendations.

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(66) "Safety plan" means a plan created to control present
or impending danger using the least intrusive means appropriate
to protect a child when a parent, caregiver, or legal custodian
is unavailable, unwilling, or unable to do so.
(71) "Sibling" means:
(a) A child who shares a birth parent or legal parent with
one or more other children; or
(b) Children who have lived together in a family and
identify themselves as siblings.
Section 4. Section 39.2015, Florida Statutes, is created to
read:
39.2015 Critical incident rapid response team
(1) The department shall conduct an immediate
investigation of deaths or other serious incidents involving
children using critical incident rapid response teams as
provided in subsection (2). The purpose of such investigation is
to identify root causes and rapidly determine the need to change
policies and practices related to child protection and child
welfare.
(2) An immediate onsite investigation conducted by a
critical incident rapid response team is required for all child
deaths reported to the department if the child or another child
in his or her family was the subject of a verified report of

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secretary may direct an immediate investigation for other cases

suspected abuse or neglect in the previous 12 months. The

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involving serious injury to a child.

- (3) Each investigation shall be conducted by a team of at least five professionals with expertise in child protection, child welfare, and organizational management. The team may be selected from employees of the department, community-based care lead agencies, other provider organizations, faculty from the institute consisting of public and private universities offering degrees in social work established pursuant to s. 1004.615, or any other persons with the required expertise. The majority of the team must reside in judicial circuits outside the location of the incident. The secretary shall appoint a team leader for each group assigned to an investigation.
- (4) An investigation shall be initiated as soon as possible, but not later than 2 business days after the case is reported to the department. A preliminary report on each case shall be provided to the secretary no later than 30 days after the investigation begins.
- (5) Each member of the team is authorized to access all information in the case file.
- (6) All employees of the department or other state agencies and all personnel from contracted provider organizations are required to cooperate with the investigation by participating in interviews and timely responding to any requests for information.
- (7) The secretary shall develop cooperative agreements

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with other entities and organizations as necessary to facilitate the work of the team.

- (8) The members of the team may be reimbursed by the department for per diem, mileage, and other reasonable expenses as provided in s. 112.061. The department may also reimburse the team member's employer for the associated salary and benefits during the time the team member is fulfilling the duties required under this section.
- (9) Upon completion of the investigation, a final report shall be made available to community-based care lead agencies, to other organizations involved in the child welfare system, and to the public through the department's website.
- established pursuant to s. 1004.615, shall develop guidelines for investigations conducted by critical incident rapid response teams and provide training to team members. Such guidelines must direct the teams in the conduct of a root-cause analysis that identifies, classifies, and attributes responsibility for both direct and latent causes for the death or other incident, including organizational factors, preconditions, and specific acts or omissions resulting from either error or a violation of procedures.
- (11) The secretary shall appoint an advisory committee

 made up of experts in child protection and child welfare to make
 an independent review of investigative reports from the critical

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incident rapid response teams and make recommendations to improve policies and practices related to child protection and child welfare services. By October 1 of each year, the advisory committee shall make an annual report to the secretary, including findings and recommendations. The secretary shall submit the report to the Governor, the President of the Senate, and the Speaker of the House of Representatives.

Section 5. Section 39.2022, Florida Statutes, is created to read:

- 39.2022 Public disclosure of child deaths reported to the child abuse hotline.—
- (1) It is the intent of the Legislature to provide prompt disclosure of the basic facts of all deaths of children from birth through 18 years of age which occur in this state and which are reported to the department's child abuse hotline.

 Disclosure shall be posted on the department's public website.

 This section does not limit the public access to records under any other provision of law.
- (2) If a child death is reported to the child abuse hotline, the department shall post on its website all of the following:
 - (a) Age, race, and gender of the child.
 - (b) Date of the child's death.
- (c) Allegations of the cause of death or the preliminary
 cause of death, until verified, at which time the verified cause

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of death will also be posted.

- (d) County and placement of the child at the time of the incident leading to the child's death, if applicable.
- (e) Name of the community-based care lead agency, case management agency, or out-of-home licensing agency involved with the child, family, or licensed caregiver, if applicable.(f)
 Whether the child has been the subject of any prior verified reports to the department's child abuse hotline.
- Section 6. Paragraph (a) of subsection (9) of section 39.301, Florida Statutes, is amended to read:
 - 39.301 Initiation of protective investigations.
- (9) (a) For each report received from the central abuse hotline and accepted for investigation, the department or the sheriff providing child protective investigative services under s. 39.3065, shall perform the following child protective investigation activities to determine child safety:
- 1. Conduct a review of all relevant, available information specific to the child and family and alleged maltreatment; family child welfare history; local, state, and federal criminal records checks; and requests for law enforcement assistance provided by the abuse hotline. Based on a review of available information, including the allegations in the current report, a determination shall be made as to whether immediate consultation should occur with law enforcement, the child protection team, a domestic violence shelter or advocate, or a substance abuse or

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mental health professional. Such consultations should include discussion as to whether a joint response is necessary and feasible. A determination shall be made as to whether the person making the report should be contacted before the face-to-face interviews with the child and family members.

- 2. Conduct face-to-face interviews with the child; other siblings, if any; and the parents, legal custodians, or caregivers.
- 3. Assess the child's residence, including a determination of the composition of the family and household, including the name, address, date of birth, social security number, sex, and race of each child named in the report; any siblings or other children in the same household or in the care of the same adults; the parents, legal custodians, or caregivers; and any other adults in the same household.
- 4. Determine whether there is any indication that any child in the family or household has been abused, abandoned, or neglected; the nature and extent of present or prior injuries, abuse, or neglect, and any evidence thereof; and a determination as to the person or persons apparently responsible for the abuse, abandonment, or neglect, including the name, address, date of birth, social security number, sex, and race of each such person.
- 5. Complete assessment of immediate child safety for each child based on available records, interviews, and observations

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with all persons named in subparagraph 2. and appropriate collateral contacts, which may include other professionals. The department's child protection investigators are hereby designated a criminal justice agency for the purpose of accessing criminal justice information to be used for enforcing this state's laws concerning the crimes of child abuse, abandonment, and neglect. This information shall be used solely for purposes supporting the detection, apprehension, prosecution, pretrial release, posttrial release, or rehabilitation of criminal offenders or persons accused of the crimes of child abuse, abandonment, or neglect and may not be further disseminated or used for any other purpose.

6. Document the present and impending dangers to each child based on the identification of inadequate protective capacity through utilization of a standardized safety assessment instrument. If present or impending danger is identified, the child protective investigator must implement a safety plan that is specific, sufficient, feasible, and sustainable in response to the realities of the present or impending danger. A safety plan may be exclusively an in-home plan, an out of home plan, or a combination of both. A safety plan may not rely on promissory commitments by the parent, caregiver, or legal custodian who is currently not able to protect the child or on services that will not result in safety. A safety plan may not be implemented if for any reason the parents, guardian, or legal custodian lacks

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the capacity or ability to comply, or if a plan is not able to be developed that is sufficient, feasible, and sustainable. The plan must include, at a minimum, the specific tasks or services, their frequency and duration, the persons responsible for each, and how implementation will be monitored, as well as parental responsibility for financial support of the child and for any services contained in the plan. The plan shall provide that individuals from outside the home shall observe the children for some period of time every day, which may be fulfilled through methods including, but not limited to, daily attendance at school or child care. A safety plan shall remain in effect as long as a parent or the parents, quardian, or legal custodian does not have the protective capacity necessary to protect the child from identified danger threats. The plan must be signed by all parties as an acknowledgement that they are in agreement with the plan, though signing the plan does not constitute an admission to any allegation of abuse, abandonment, or neglect and does not constitute consent to a finding of dependency or termination of parental rights. The child protective investigator shall transfer the case to the community based care lead agency for on-going safety management and on-going services prior to closure of the investigation. *a) If present danger is identified, the child protective investigator shall create and implement the plan before leaving

the home or the location where there is present danger.

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- (b) Upon completion of the immediate safety assessment, the department shall determine the additional activities necessary to assess impending dangers, if any, and close the investigation. If impending danger is identified, the child protective investigator shall work with the lead agency community-based care case manager to create and implement a safety plan in response to the impending danger.
- (14) (a) If the department or its agent determines that a child requires immediate or long-term protection through:
 - 1. medical or other health care; or
- 2. homemaker care, day care, protective supervision, or other services to stabilize the home environment, including intensive family preservation services through the Intensive Crisis Counseling Program,

such services shall first be offered for voluntary acceptance unless:

- 1. There are high-risk factors that may impact the ability of the parents or legal custodians to exercise judgment. Such factors may include the parents' or legal custodians' young age or history of substance abuse, mental illness, or domestic violence; or
- 2. There is a high likelihood of lack of compliance with voluntary services, and such noncompliance would result in the child being unsafe.

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The parents or legal custodians shall be informed of the right to refuse services, as well as the responsibility of the department to protect the child regardless of the acceptance or refusal of services. If the services are refused, a collateral contact shall include a relative, if the protective investigator has knowledge of and the ability to contact a relative. If the services are refused and the department deems that the child's need for protection so requires services, the department shall take the child into protective custody or petition the court as provided in this chapter. At any time after the commencement of a protective investigation, a relative may submit in writing to the protective investigator or case manager a request to receive notification of all proceedings and hearings in accordance with s. 39.502. The request shall include the relative's name, address, and phone number and the relative's relationship to the child. The protective investigator or case manager shall forward such request to the attorney for the department. The failure to provide notice to either a relative who requests it pursuant to this subsection or to a relative who is providing out-of-home care for a child may not result in any previous action of the court at any stage or proceeding in dependency or termination of parental rights under any part of this chapter being set aside, reversed, modified, or in any way changed absent a finding by the court that a change is required in the child's best interests.

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- (c) The department, in consultation with the judiciary, shall adopt by rule:
- 1. Criteria that are factors requiring that the department take the child into custody, petition the court as provided in this chapter, or, if the child is not taken into custody or a petition is not filed with the court, conduct an administrative review. Such factors must include, but are not limited to, noncompliance with a safety plan or the case plan developed by the department, or its agent, and the family under this chapter, and prior abuse reports with findings that involve the child, a sibling, or caregiver.
- 2. Requirements that if after an administrative review the department determines not to take the child into custody or petition the court, the department shall document the reason for its decision in writing and include it in the investigative file. For all cases that were accepted by the local law enforcement agency for criminal investigation pursuant to subsection (2), the department must include in the file written documentation that the administrative review included input from law enforcement. In addition, for all cases that must be referred to child protection teams pursuant to s. 39.303(2) and (3), the file must include written documentation that the administrative review included the results of the team's evaluation. Factors that must be included in the development of the rule include noncompliance with the case plan developed by

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the department, or its agent, and the family under this chapter and prior abuse reports with findings that involve the child or caregiver.

Section 7. Section 39.303, Florida Statutes, is amended to read:

39.303 Child protection teams; services; eligible cases.-The Children's Medical Services Program in the Department of Health shall develop, maintain, and coordinate the services of one or more multidisciplinary child protection teams in each of the service districts of the Department of Children and Family Services. Such teams may be composed of appropriate representatives of school districts and appropriate health, mental health, social service, legal service, and law enforcement agencies. The Legislature finds that optimal coordination of child protection teams and sexual abuse treatment programs requires collaboration between The Department of Health and the Department of Children and Families Family Services. The two departments shall maintain an interagency agreement that establishes protocols for oversight and operations of child protection teams and sexual abuse treatment programs. The State Surgeon General and the Deputy Secretary for Children's Medical Services, in consultation with the Secretary of Children and Family Services, shall maintain the responsibility for the screening, employment, and, if necessary, the termination of child protection team medical directors, at

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headquarters and in the 15 districts. Child protection team medical directors shall be responsible for oversight of the teams in the districts.

- The Department of Health shall use utilize and convene (1)the teams to supplement the assessment and protective supervision activities of the family safety and preservation program of the Department of Children and Families Family Services. Nothing in This section does not shall be construed to remove or reduce the duty and responsibility of any person to report pursuant to this chapter all suspected or actual cases of child abuse, abandonment, or neglect or sexual abuse of a child. The role of the teams shall be to support activities of the program and to provide services deemed by the teams to be necessary and appropriate to abused, abandoned, and neglected children upon referral. The specialized diagnostic assessment, evaluation, coordination, consultation, and other supportive services that a child protection team shall be capable of providing include, but are not limited to, the following:
- (a) Medical diagnosis and evaluation services, including provision or interpretation of X rays and laboratory tests, and related services, as needed, and documentation of <u>related</u> findings relative thereto.
- (b) Telephone consultation services in emergencies and in other situations.
 - (c) Medical evaluation related to abuse, abandonment, or

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neglect, as defined by policy or rule of the Department of Health.

- (d) Such psychological and psychiatric diagnosis and evaluation services for the child or the child's parent or parents, legal custodian or custodians, or other caregivers, or any other individual involved in a child abuse, abandonment, or neglect case, as the team may determine to be needed.
- (e) Expert medical, psychological, and related professional testimony in court cases.
- (f) Case staffings to develop treatment plans for children whose cases have been referred to the team. A child protection team may provide consultation with respect to a child who is alleged or is shown to be abused, abandoned, or neglected, which consultation shall be provided at the request of a representative of the family safety and preservation program or at the request of any other professional involved with a child or the child's parent or parents, legal custodian or custodians, or other caregivers. In every such child protection team case staffing, consultation, or staff activity involving a child, a family safety and preservation program representative shall attend and participate.
- (g) Case service coordination and assistance, including the location of services available from other public and private agencies in the community.
 - (h) Such training services for program and other employees

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of the Department of Children and <u>Families</u> <u>Family Services</u>, employees of the Department of Health, and other medical professionals as is deemed appropriate to enable them to develop and maintain their professional skills and abilities in handling child abuse, abandonment, and neglect cases.

- (i) Educational and community awareness campaigns on child abuse, abandonment, and neglect in an effort to enable citizens more successfully to prevent, identify, and treat child abuse, abandonment, and neglect in the community.
- (j) Child protection team assessments that include, as appropriate, medical evaluations, medical consultations, family psychosocial interviews, specialized clinical interviews, or forensic interviews.

All medical personnel participating on a child protection team must successfully complete the required child protection team training curriculum as set forth in protocols determined by the Deputy Secretary for Children's Medical Services and the Statewide Medical Director for Child Protection. A child protection team that is evaluating a report of medical neglect and assessing the health care needs of a medically complex child shall consult with a physician who has experience in treating children with the same condition.

(2) The child abuse, abandonment, and neglect reports that must be referred by the department to child protection teams of

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the Department of Health for an assessment and other appropriate available support services as set forth in subsection (1) must include cases involving:

- (a) Injuries to the head, bruises to the neck or head, burns, or fractures in a child of any age.
 - (b) Bruises anywhere on a child 5 years of age or under.
 - (c) Any report alleging sexual abuse of a child.
- (d) Any sexually transmitted disease in a prepubescent child.
- (e) Reported malnutrition of a child and failure of a child to thrive.
 - (f) Reported medical neglect of a child.
- (g) Any family in which one or more children have been pronounced dead on arrival at a hospital or other health care facility, or have been injured and later died, as a result of suspected abuse, abandonment, or neglect, when any sibling or other child remains in the home.
- (h) Symptoms of serious emotional problems in a child when emotional or other abuse, abandonment, or neglect is suspected.
- (3) All abuse and neglect cases transmitted for investigation to a district by the hotline must be simultaneously transmitted to the Department of Health child protection team for review. For the purpose of determining whether face-to-face medical evaluation by a child protection team is necessary, all cases transmitted to the child protection

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team which meet the criteria in subsection (2) must be timely reviewed by:

- (a) A physician licensed under chapter 458 or chapter 459 who holds board certification in pediatrics and is a member of a child protection team;
- (b) A physician licensed under chapter 458 or chapter 459 who holds board certification in a specialty other than pediatrics, who may complete the review only when working under the direction of a physician licensed under chapter 458 or chapter 459 who holds board certification in pediatrics and is a member of a child protection team;
- (c) An advanced registered nurse practitioner licensed under chapter 464 who has a <u>specialty</u> speciality in pediatrics or family medicine and is a member of a child protection team;
- (d) A physician assistant licensed under chapter 458 or chapter 459, who may complete the review only when working under the supervision of a physician licensed under chapter 458 or chapter 459 who holds board certification in pediatrics and is a member of a child protection team; or
- (e) A registered nurse licensed under chapter 464, who may complete the review only when working under the direct supervision of a physician licensed under chapter 458 or chapter 459 who holds certification in pediatrics and is a member of a child protection team.
 - (4) A face-to-face medical evaluation by a child

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protection team is not necessary when:

- (a) The child was examined for the alleged abuse or neglect by a physician who is not a member of the child protection team, and a consultation between the child protection team board-certified pediatrician, advanced registered nurse practitioner, physician assistant working under the supervision of a child protection team board-certified pediatrician, or registered nurse working under the direct supervision of a child protection team board-certified pediatrician, and the examining physician concludes that a further medical evaluation is unnecessary;
- (b) The child protective investigator, with supervisory approval, has determined, after conducting a child safety assessment, that there are no indications of injuries as described in paragraphs (2)(a)-(h) as reported; or
- (c) The child protection team board-certified pediatrician, as authorized in subsection (3), determines that a medical evaluation is not required.

Notwithstanding paragraphs (a), (b), and (c), a child protection team pediatrician, as authorized in subsection (3), may determine that a face-to-face medical evaluation is necessary.

(5) In all instances in which a child protection team is providing certain services to abused, abandoned, or neglected children, other offices and units of the Department of Health,

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and offices and units of the Department of Children and <u>Families</u>

Family Services, shall avoid duplicating the provision of those services.

assurance program and the Department of Children and Families

Family Services' Family Safety Program Office quality assurance

program shall collaborate to ensure referrals and responses to

child abuse, abandonment, and neglect reports are appropriate.

Each quality assurance program shall include a review of records

in which there are no findings of abuse, abandonment, or

neglect, and the findings of these reviews shall be included in

each department's quality assurance reports.

Section 8. Section 39.3068, Florida Statutes, is created to read:

39.3068 Reports of Medical Neglect.-

- (1) Upon receiving a report alleging medical neglect as defined in s. 39.01, the department or sheriff's office shall assign the case to a child protective investigator who has specialized training in addressing medical neglect or working with medically complex children.
- (2) The child protective investigator who has interacted with the child and the child's family shall promptly contact and provide information to the child protection team. The child protection team shall assist the child protective investigator in identifying immediate responses to address the medical needs

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of the child with the priority of maintaining the child in the home if the parents will be able to meet the needs of the child with additional services. The child protective investigator and the child protection team must use a family-centered approach to assess the capacity of the family to meet those needs. A family-centered approach is intended to increase independence on the part of the family, accessibility to programs and services within the community, and collaboration between families and their service providers. The ethnic, cultural, economic, racial, social, and religious diversity of families must be respected and considered in the development and provision of services. The child shall be evaluated by the child protection team as soon as practicable. After receipt of the report from the child protection team, the department shall have a case staffing which shall be attended, at a minimum, by the child protective investigator, department legal staff, and representatives from the child protection team which evaluated the child, Children's Medical Services, the Agency for Health Care Administration, the community-based care lead agency, and any providers of services to the child. However, the Agency for Health Care Administration is not required to attend the

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shall, at a minimum, consider which services are available given

staffing if the child is not Medicaid eligible. The staffing

addressing issues leading to medical neglect allegations that

the family's eligibility for services, and effective in

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would enable the child to safely remain at home. If such services are available and effective, they shall be provided.

Section 9. Paragraph (h) of subsection (8) and subsection (9) of section 39.402, Florida Statutes, are amended to read:

39.402 Placement in a shelter.-

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- (h) The order for placement of a child in shelter care must identify the parties present at the hearing and must contain written findings:
- 1. That placement in shelter care is necessary based on the criteria in subsections (1) and (2).
- 2. That placement in shelter care is in the best interest of the child.
- 3. That continuation of the child in the home is contrary to the welfare of the child because the home situation presents a substantial and immediate danger to the child's physical, mental, or emotional health or safety which cannot be mitigated by the provision of preventive services.
- 4. That based upon the allegations of the petition for placement in shelter care, there is probable cause to believe that the child is dependent or that the court needs additional time, which may not exceed 72 hours, in which to obtain and review documents pertaining to the family in order to appropriately determine the risk to the child.
 - 5. That the department has made reasonable efforts to

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prevent or eliminate the need for removal of the child from the home. A finding of reasonable effort by the department to prevent or eliminate the need for removal may be made and the department is deemed to have made reasonable efforts to prevent or eliminate the need for removal if:

- a. The first contact of the department with the family occurs during an emergency;
- b. The appraisal of the home situation by the department indicates that the home situation presents a substantial and immediate danger to the child's physical, mental, or emotional health or safety which cannot be mitigated by the provision of preventive services;
- c. The child cannot safely remain at home, either because there are no preventive services that can ensure the health and safety of the child or because, even with appropriate and available services being provided, the health and safety of the child cannot be ensured; or
- d. The parent or legal custodian is alleged to have committed any of the acts listed as grounds for expedited termination of parental rights in s. 39.806(1)(f)-(i).
- 6. That the department has made reasonable efforts to keep siblings together if they are removed and placed in out-of-home care unless such a placement is not in the best interest of each child. The department shall report to the court its efforts to place siblings together unless the court finds that such

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placement is not in the best interest of a child or his or her sibling.

- 7.6. That the court notified the parents, relatives that are providing out-of-home care for the child, or legal custodians of the time, date, and location of the next dependency hearing and of the importance of the active participation of the parents, relatives that are providing out-of-home care for the child, or legal custodians in all proceedings and hearings.
- 8.7. That the court notified the parents or legal custodians of their right to counsel to represent them at the shelter hearing and at each subsequent hearing or proceeding, and the right of the parents to appointed counsel, pursuant to the procedures set forth in s. 39.013.
- 9.8. That the court notified relatives who are providing out-of-home care for a child as a result of the shelter petition being granted that they have the right to attend all subsequent hearings, to submit reports to the court, and to speak to the court regarding the child, if they so desire.
- (9) (a) At any shelter hearing, the department shall provide to the court a recommendation for scheduled contact between the child and parents, if appropriate. The court shall determine visitation rights absent a clear and convincing showing that visitation is not in the best interest of the child. Any order for visitation or other contact must conform to

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the provisions of s. 39.0139. If visitation is ordered but will not commence within 72 hours of the shelter hearing, the department shall provide justification to the court.

- (b) If siblings who are removed from the home cannot be placed together, the department shall provide to the court a recommendation for frequent visitation or other ongoing interaction between the siblings unless this interaction would be contrary to a sibling's safety or well-being. If visitation among siblings is ordered but will not commence within 72 hours of the shelter hearing, the department shall provide justification to the court for the delay.
- Section 10. Paragraph (d) of subsection (3) of section 39.501, Florida Statutes, is amended to read:
 - 39.501 Petition for dependency.-

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- 1016 (d) The petitioner must state in the petition, if known, 1017 whether:
 - 1. A parent or legal custodian named in the petition has previously unsuccessfully participated in voluntary services offered by the department;
 - 2. A parent or legal custodian named in the petition has participated in mediation and whether a mediation agreement exists;
- 3. A parent or legal custodian has rejected the voluntary services offered by the department;

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- 4. A parent or legal custodian named in the petition has not fully complied with a safety plan; or
- 5. 4. The department has determined that voluntary services are not appropriate for the parent or legal custodian and the reasons for such determination.

If the petitioner is the department, it shall provide all safety assessments and safety plans involving the parent or legal custodian to the court.

Section 11. Paragraph (c) of subsection (2) and paragraph (a) of subsection (3) of section 39.701, Florida Statutes, is amended to read:

- 39.701 Judicial review.-
- (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF AGE.—
- co) Review determinations.—The court and any citizen review panel shall take into consideration the information contained in the social services study and investigation and all medical, psychological, and educational records that support the terms of the case plan; testimony by the social services agency, the parent, the foster parent or legal custodian, the guardian ad litem or surrogate parent for educational decisionmaking if one has been appointed for the child, and any other person deemed appropriate; and any relevant and material evidence submitted to the court, including written and oral reports to

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the extent of their probative value. These reports and evidence may be received by the court in its effort to determine the action to be taken with regard to the child and may be relied upon to the extent of their probative value, even though not competent in an adjudicatory hearing. In its deliberations, the court and any citizen review panel shall seek to determine:

- 1. If the parent was advised of the right to receive assistance from any person or social service agency in the preparation of the case plan.
- 2. If the parent has been advised of the right to have counsel present at the judicial review or citizen review hearings. If not so advised, the court or citizen review panel shall advise the parent of such right.
- 3. If a guardian ad litem needs to be appointed for the child in a case in which a guardian ad litem has not previously been appointed or if there is a need to continue a guardian ad litem in a case in which a guardian ad litem has been appointed.
- 4. Who holds the rights to make educational decisions for the child. If appropriate, the court may refer the child to the district school superintendent for appointment of a surrogate parent or may itself appoint a surrogate parent under the Individuals with Disabilities Education Act and s. 39.0016.
- 5. The compliance or lack of compliance of all parties with applicable items of the case plan, including the parents' compliance with child support orders.

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- 6. The compliance or lack of compliance with a visitation contract between the parent and the social service agency for contact with the child, including the frequency, duration, and results of the parent-child visitation and the reason for any noncompliance.
- 7. The frequency, kind, and duration of sibling contacts among siblings who have been separated during placement, as well as any efforts undertaken to reunite separated siblings if doing so is in the best interest of the child.
- 8.7. The compliance or lack of compliance of the parent in meeting specified financial obligations pertaining to the care of the child, including the reason for failure to comply, if applicable such is the case.
- 9.8. Whether the child is receiving safe and proper care according to s. 39.6012, including, but not limited to, the appropriateness of the child's current placement, including whether the child is in a setting that is as family-like and as close to the parent's home as possible, consistent with the child's best interests and special needs, and including maintaining stability in the child's educational placement, as documented by assurances from the community-based care provider that:
- a. The placement of the child takes into account the appropriateness of the current educational setting and the proximity to the school in which the child is enrolled at the

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time of placement.

- b. The community-based care agency has coordinated with appropriate local educational agencies to ensure that the child remains in the school in which the child is enrolled at the time of placement.
- 9. A projected date likely for the child's return home or other permanent placement.
- 11.10. When appropriate, the basis for the unwillingness or inability of the parent to become a party to a case plan. The court and the citizen review panel shall determine if the efforts of the social service agency to secure party participation in a case plan were sufficient.
- 12.11. For a child who has reached 13 years of age but is not yet 18 years of age, the adequacy of the child's preparation for adulthood and independent living.
- 13.12. If amendments to the case plan are required. Amendments to the case plan must be made under s. 39.6013.
 - (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.
- (a) In addition to the review and report required under paragraphs (1)(a) and (2)(a), respectively, the court shall hold a judicial review hearing within 90 days after a child's 17th birthday. The court shall also issue an order, separate from the order on judicial review, that the disability of nonage of the child has been removed pursuant to <u>ss. 743.044, 743.045, and</u> 743.046, and for any of these disabilities that the court finds

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is in the child's best interest to remove. The court s. 743.045 and shall continue to hold timely judicial review hearings. If necessary, the court may review the status of the child more frequently during the year before the child's 18th birthday. At each review hearing held under this subsection, in addition to any information or report provided to the court by the foster parent, legal custodian, or guardian ad litem, the child shall be given the opportunity to address the court with any information relevant to the child's best interest, particularly in relation to independent living transition services. The department shall include in the social study report for judicial review written verification that the child has:

- 1. A current Medicaid card and all necessary information concerning the Medicaid program sufficient to prepare the child to apply for coverage upon reaching the age of 18, if such application is appropriate.
- 2. A certified copy of the child's birth certificate and, if the child does not have a valid driver license, a Florida identification card issued under s. 322.051.
- 3. A social security card and information relating to social security insurance benefits if the child is eligible for those benefits. If the child has received such benefits and they are being held in trust for the child, a full accounting of these funds must be provided and the child must be informed as to how to access those funds.

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- 4. All relevant information related to the Road-to-Independence Program, including, but not limited to, eligibility requirements, information on participation, and assistance in gaining admission to the program. If the child is eligible for the Road-to-Independence Program, he or she must be advised that he or she may continue to reside with the licensed family home or group care provider with whom the child was residing at the time the child attained his or her 18th birthday, in another licensed family home, or with a group care provider arranged by the department.
- 5. An open bank account or the identification necessary to open a bank account and to acquire essential banking and budgeting skills.
- 6. Information on public assistance and how to apply for public assistance.
- 7. A clear understanding of where he or she will be living on his or her 18th birthday, how living expenses will be paid, and the educational program or school in which he or she will be enrolled.
- 8. Information related to the ability of the child to remain in care until he or she reaches 21 years of age under s. 39.013.
- 9. A letter providing the dates that the child is under the jurisdiction of the court.
 - 10. A letter stating that the child is in compliance with

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1176 financial aid documentation requirements.

- 11. The child's educational records.
- 12. The child's entire health and mental health records.
 - 13. The process for accessing his or her case file.
- 1180 14. A statement encouraging the child to attend all judicial review hearings occurring after the child's 17th birthday.
- Section 12. Subsection (2) of section 39.802, Florida
 1184 Statutes, is amended to read:
 - 39.802 Petition for termination of parental rights; filing; elements.—
 - (2) The form of the petition is governed by the Florida Rules of Juvenile Procedure. The petition must be in writing and signed by the petitioner or, if the department is the petitioner, by an employee of the department, under oath stating the petitioner's good faith in filing the petition.
 - Section 13. Subsection (1) and paragraph (c) of subsection (3) of section 383.402, Florida Statutes, are amended to read:
 - 383.402 Child abuse death review; State Child Abuse Death Review Committee; local child abuse death review committees.—
 - (1) It is the intent of the Legislature to establish a statewide multidisciplinary, multiagency child abuse death assessment and prevention system that consists of state and local review committees. The state and local review committees shall review the facts and circumstances of all deaths of

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children from birth through age 18 which occur in this state and are reported to the child abuse hotline of the Department of Children and Families as the result of verified child abuse or neglect. The purpose of the review shall be to:

- (a) Achieve a greater understanding of the causes and contributing factors of deaths resulting from child abuse.
- (b) Whenever possible, develop a communitywide approach to address such cases and contributing factors.
- (c) Identify any gaps, deficiencies, or problems in the delivery of services to children and their families by public and private agencies which may be related to deaths that are the result of child abuse.
- (d) Make and implement recommendations for changes in law, rules, and policies, as well as develop practice standards that support the safe and healthy development of children and reduce preventable child abuse deaths.
 - (3) The State Child Abuse Death Review Committee shall:
- (c) Prepare an annual statistical report on the incidence and causes of death resulting from reported child abuse in the state during the prior calendar year. The state committee shall submit a copy of the report by October 1 December 31 of each year to the Governor, the President of the Senate, and the Speaker of the House of Representatives. The report must include recommendations for state and local action, including specific policy, procedural, regulatory, or statutory changes, and any

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other recommended preventive action.

Section 14. Subsection (5) of section 402.40, Florida Statutes, is amended to read:

- 402.40 Child welfare training and certification.-
- (5) CORE COMPETENCIES AND SPECIALIZATIONS.-
- (a) The Department of Children and Families Family
 Services shall approve the core competencies and related
 preservice curricula that ensures that each person delivering
 child welfare services obtains the knowledge, skills, and
 abilities to competently carry out his or her work
 responsibilities.
- (b) The identification of these core competencies and development of preservice curricula shall be a collaborative effort that includes professionals who have expertise in child welfare services, department-approved third-party credentialing entities, and providers that will be affected by the curriculum, including, but not limited to, representatives from the community-based care lead agencies, sheriffs' offices conducting child protection investigations, and child welfare legal services providers.
- (c) Community-based care agencies, sheriffs' offices, and the department may contract for the delivery of preservice and any additional training for persons delivering child welfare services if the curriculum satisfies the department-approved core competencies.

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- (d) The department may also approve specializations in serving specific populations or in skills relevant to child protection for which individuals may be certified.
- (e)((d) Department-approved credentialing entities shall, for a period of at least 12 months after implementation of the third-party child welfare certification programs, grant reciprocity and award a child welfare certification to individuals who hold current department-issued child welfare certification in good standing, at no cost to the department or the certificateholder.
- Section 15. Section 402.402, Florida Statutes, is created to read:
- 402.402 Child protective investigators; child protection investigation supervisors; department attorneys handling child welfare cases.-
 - (1) As used in this section, the term:
- (a) "Human services related field" means social work,
 psychology, sociology, counseling, special education, human
 development, child development, family development, marriage and
 family therapy, and nursing.
- (b) "Relevant coursework" means coursework that imparts knowledge and leads to the development of skills with direct application to the child protection and child welfare field from a college or university social work program accredited by the Council on Social Work Education.

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- (2) CHILD PROTECTIVE INVESTIGATION STAFF REQUIREMENTS.-
- (a) Child protective investigators and child protective investigation supervisors hired on or after July 1, 2014, by the department or a sheriff's office must have one of the following:
- 1. A bachelor's or a master's degree in social work from a college or university social work program accredited by the Council on Social Work Education. The individual shall have had at least 12 credit hours of relevant coursework.
- 2. A bachelor's degree or a master's degree in a humanservices related field and at least 12 credit hours of relevant coursework.
- 3. A bachelor's degree or a master's degree in a humanservices related field. Within three years of hire, such
 individuals shall complete 12 credit hours of relevant
 coursework. The sequence of courses may be designed to provide
 in-depth knowledge in serving a specific subpopulation or
 developing a specific set of skills relevant to child
 protection. The department shall consult with the institute
 authorized in s. 1004.615 to identify courses available through
 the consortium of public and private universities in the state
 offering degrees in social work that fulfills this requirement.
- (b) All child protective investigators and child protective investigation supervisors shall complete specialized training either focused in serving a specific population, including but not limited to medically fragile children,

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sexually exploited children, children under the age of three, or
families with issues of domestic violence, mental illness, or
substance abuse, or in performing certain aspects of child
protection practice, such as investigation techniques and
analysis of family dynamics. The specialized training may be
used to fulfill continuing education requirements pursuant to
402.40(2)(e). Individuals hired before July 1, 2014, shall
complete the specialized training by June 30, 2016, and those
hired on or after July 1, 2014, shall complete the specialized
training within two years of hire. An individual may receive
specialized training in multiple areas.
(2) ATTORNEYS FOR THE DEPARTMENT HANDLING CHILD WELFARE
CASES.—
(a) Attorneys for the department handling child welfare
cases hired on or after July 1, 2014, shall:
1. Receive, at a minimum, the same pre-service training
provided to child protective investigators.
2. Within 60 days of hiring, shadow an experienced child
protective investigator and an experienced case manager for at
<pre>least 8 hours each.</pre>
Section 16. Section 402.403, Florida Statutes, is created
to read:

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There is established within the department the Child

402.403 Child Protective Investigator and Supervisor

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(1)

CODING: Words stricken are deletions; words underlined are additions.

Tuition Exemption Program.-

Protective Investigator and Supervisor Tuition Exemption Program
for the purpose of recruiting and retaining high-performing
individuals who are employed as child protective investigators
or child protective investigation supervisors with the
department or a sheriff's office and who do not have a
bachelor's degree or master's degree in social work. The
department or sheriff's office may approve the exemption from
tuition and fees for a state university for an employee who:
(a) Has been employed as a child protective investigator
or child protective investigation supervisor by the department
or sheriff's office for at least two years and who is determined
by the department or sheriff's office to have a high level of
performance; and
(b) Is accepted in an upper-division undergraduate or
graduate level college or university social work program
accredited by the Council on Social Work Education which leads
to either a bachelor's degree or a master's degree in social
work, or is completing 12 credit hours of relevant coursework as
required under s. 402.403(2)(a)3.
Section 17. Section 402.404, Florida Statutes, is created
to read:
402.404 Child Protective Investigator and Supervisor
Student Loan Forgiveness Program
(1) There is established within the department the Florida

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Child Protective Investigator and Supervisor Student Loan

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Employment and retention of high-performing individuals who have either a bachelor's degree or a master's degree in social work as child protective investigators or child protective investigation supervisors with the department or sheriff's office by making payments toward loans received by students from federal or state programs or commercial lending institutions for the support of prior postsecondary study in accredited social work programs.

- (2) In order to be eligible for the program, a candidate must be employed as a child protective investigator or child protective investigation supervisor by the department or a sheriff's office for at least two years, must be determined by the department or sheriff's office to have a high level of performance, and must have graduated from an accredited social work program with either a bachelor's degree or a master's degree in social work.
- (3) Only loans to pay the costs of tuition, books, fees, and living expenses shall be covered.
- (4) The department may make loan payments of up to \$3,000 each year for up to 4 years on behalf of selected graduates of an accredited social work program from the funds appropriated for this purpose. All payments are contingent upon continued proof of employment as a child protective investigator or a child protective investigation supervisor with the department or

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sheriff's office and made directly to the holder of the loan.

(5) A student who receives a tuition exemption pursuant to s. 402.403 is not eligible to participate in the Child Protective Investigator Student Loan Forgiveness Program.

Section 18. Section 409.165, Florida Statutes, is amended to read:

409.165 Alternate care for children.-

- (1) Within funds appropriated, the department shall establish and supervise a program of emergency shelters, runaway shelters, foster homes, group homes, agency-operated group treatment homes, nonpsychiatric residential group care facilities, psychiatric residential treatment facilities, and other appropriate facilities to provide shelter and care for dependent children who must be placed away from their families. The department, in accordance with <u>outcome</u> <u>established</u> goals <u>established</u> in s. 409.986, shall contract for the provision of such shelter and care by counties, municipalities, nonprofit corporations, and other entities capable of providing needed services if:
- (a) The services so provided <u>comply with all department</u> standards, policies, and procedures are available;
- (b) The services <u>can be</u> so provided <u>at a reasonable cost</u> are more cost-effective than those provided by the department; and
 - (c) Unless otherwise provided by law, such providers of $Page 56 { of } 109$

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shelter and care are licensed by the department.

It is the legislative intent that the

- (2) Funds appropriated for the alternate care of children as described in this section may be used to meet the needs of children in their own homes or those of relatives if the children can be safely served in <u>such settings</u> their own homes, or the homes of relatives, and the expenditure of funds in such manner is <u>equal</u> to or less than the cost of out-of-home <u>placement</u> calculated by the department to be an eventual cost savings over placement of children.
- (3) (2) The department shall may cooperate with all child service institutions or agencies within the state which meet the department's standards in order to maintain a comprehensive, coordinated, and inclusive system for promoting and protecting the well-being of children, consistent with the goals established in s. 409.986 rules for proper care and supervision prescribed by the department for the well-being of children.
- (a) The department shall work with the Department of Health in the development, utilization, and monitoring of medical foster homes for medically complex children.
- (b) The department shall work with the Agency for Health
 Care Administration to provide such home and community-based
 services as may be necessary to maintain medically complex
 children in the least restrictive and most nurturing

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- (4)(3) With the written consent of parents, custodians, or guardians, or in accordance with those provisions in chapter 39 that relate to dependent children, the department, under rules properly adopted, may place a child:
 - (a) With a relative;
- (b) With an adult nonrelative approved by the court for long-term custody;
- (c) With a person who is considering the adoption of a child in the manner provided for by law;
- (d) When limited, except as provided in paragraph (b), to temporary emergency situations, with a responsible adult approved by the court;
- (e) With a person or family approved by the department to serve as a medical foster home;
- $\underline{\text{(f)}}$ (e) With a person or agency licensed by the department in accordance with s. 409.175; or
- 1443 $\underline{\text{(g)}}$ In a subsidized independent living situation, 1444 subject to the provisions of s. 409.1451(4)(c),

under such conditions as are determined to be for the best interests or the welfare of the child. Any child placed in an institution or in a family home by the department or its agency may be removed by the department or its agency, and such other disposition may be made as is for the best interest of the

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child, including transfer of the child to another institution, another home, or the home of the child. Expenditure of funds appropriated for out-of-home care can be used to meet the needs of a child in the child's own home or the home of a relative if the child can be safely served in the child's own home or that of a relative if placement can be avoided by the expenditure of such funds, and if the expenditure of such funds in this manner is equal to or less than the cost of out-of-home placement calculated by the department to be a potential cost savings.

Section 19. Paragraph (c) of subsection (2) of section 409.967, Florida Statutes, is amended to read:

- 409.967 Managed care plan accountability.-
- (2) The agency shall establish such contract requirements as are necessary for the operation of the statewide managed care program. In addition to any other provisions the agency may deem necessary, the contract must require:
 - (c) Access.-
- 1. The agency shall establish specific standards for the number, type, and regional distribution of providers in managed care plan networks to ensure access to care for both adults and children. Each plan must maintain a regionwide network of providers in sufficient numbers to meet the access standards for specific medical services for all recipients enrolled in the plan. The exclusive use of mail-order pharmacies may not be sufficient to meet network access standards. Consistent with the

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standards established by the agency, provider networks may include providers located outside the region. A plan may contract with a new hospital facility before the date the hospital becomes operational if the hospital has commenced construction, will be licensed and operational by January 1, 2013, and a final order has issued in any civil or administrative challenge. Each plan shall establish and maintain an accurate and complete electronic database of contracted providers, including information about licensure or registration, locations and hours of operation, specialty credentials and other certifications, specific performance indicators, and such other information as the agency deems necessary. The database must be available online to both the agency and the public and have the capability to compare the availability of providers to network adequacy standards and to accept and display feedback from each provider's patients. Each plan shall submit quarterly reports to the agency identifying the number of enrollees assigned to each primary care provider.

2. Each managed care plan must publish any prescribed drug formulary or preferred drug list on the plan's website in a manner that is accessible to and searchable by enrollees and providers. The plan must update the list within 24 hours after making a change. Each plan must ensure that the prior authorization process for prescribed drugs is readily accessible to health care providers, including posting appropriate contact

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information on its website and providing timely responses to providers. For Medicaid recipients diagnosed with hemophilia who have been prescribed anti-hemophilic-factor replacement products, the agency shall provide for those products and hemophilia overlay services through the agency's hemophilia disease management program.

- 3. Managed care plans, and their fiscal agents or intermediaries, must accept prior authorization requests for any service electronically.
- 4. Managed care plans serving children in the care and custody of the Department of Children and Families must maintain complete medical, dental, and behavioral health information and provide such information to the department for inclusion in the state's child welfare data system. Using such documentation, the agency and the department shall determine the plan's compliance with standards for access to medical, dental, and behavioral health services, the use of psychotropic medications, and followup on all medically necessary services recommended as a result of early and periodic screening diagnosis and treatment.

Section 20. The Division of Law Revision and Information is directed to create part V of chapter 409, Florida Statutes, consisting of ss. 409.986-409.998, Florida Statutes, to be titled "Community-Based Child Welfare."

Section 21. Section 409.986, Florida Statutes, is created to read:

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1526	409.986 Legislative findings, intent, and definitions
1527	(1) LEGISLATIVE FINDINGS AND INTENT
1528	(a) It is the intent of the Legislature that the
1529	Department of Children and Families provide child protection and
1530	child welfare services to children through contracting with
1531	community-based care lead agencies. It is further the
1532	Legislature's intent that communities and other stakeholders in
1533	the well-being of children participate in assuring safety,
1534	permanence, and well-being for all children in the state.
1535	(b) The Legislature finds that, when private entities
1536	assume responsibility for the care of children in the child
1537	protection and child welfare system, adequate oversight of the
1538	programmatic, administrative, and fiscal operation of those
1539	entities is essential. The Legislature finds that, ultimately,
1540	the appropriate care of children is the responsibility of the
1541	state and outsourcing the provision of such care does not
1542	relieve the state of its responsibility to ensure that
1543	appropriate care is provided.
1544	(2) CHILD PROTECTION AND CHILD WELFARE OUTCOMES.—It is the
1545	goal of the department to achieve the following outcomes in
1546	conjunction with the community-based care lead agency,
1547	community-based subcontractors, and the community-based care
1548	alliance:
1549	(a) Children are first and foremost protected from abuse
1550	and neglect.

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1551	(b) Children are safely maintained in their homes if
1552	possible and appropriate.
1553	(c) Services are provided to protect children and prevent
1554	removal from the home.
1555	(d) Children have permanency and stability in their living
1556	arrangements.
1557	(e) Family relationships and connections are preserved for
1558	children.
1559	(f) Families have enhanced capacity to provide for their
1560	children's needs.
1561	(g) Children receive appropriate services to meet their
1562	educational needs.
1563	(h) Children receive adequate services to meet their
1564	physical and mental health needs.
1565	(i) Children develop capacity for independent living and
1566	competence as an adult.
1567	(3) DEFINITIONS.—As used in this part, except as otherwise
1568	specially provided, the term:
1569	(a) "Child" or "children" means has the same meaning as
1570	the term "child" as defined in s. 39.01.
1571	(b) "Dependent child" means a child who has been
1572	determined by the court to be in need of care due to allegations
1573	of abuse, neglect, or abandonment.
1574	(c) "Care" means services of any kind which are designed

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to facilitate a child remaining safely in his or her own home,

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returning safely to his or her own home if he or she is removed, or obtaining an alternative permanent home if he or she cannot remain home or be returned home.

- (d) "Community-based care lead agency" or "lead agency" means a single entity with which the department has a contract for the provision of care for children in the child protection and child welfare system in a community that is no smaller than a county and no larger than two contiguous judicial circuits.

 The secretary of the department may authorize more than one eligible lead agency within a single county if doing so will result in more effective delivery of services to children.
- (e) "Community-based care alliance" or "alliance" means
 the group of stakeholders, community leaders, client
 representatives, and funders of human services established to
 provide a focal point for community participation and oversight
 of community-based services.
- (f) "Related services" includes, but is not limited to, family preservation, independent living, emergency shelter, residential group care, foster care, therapeutic foster care, intensive residential treatment, foster care supervision, case management, coordination of mental health services, postplacement supervision, permanent foster care, and family reunification.

Section 22. Section 409.987, Florida Statutes, is created to read:

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1601	409.987 Lead agency procurement.—
1602	(1) Community-based care lead agencies shall be procured
1603	by the department through a competitive process as required by
1604	<pre>chapter 287.</pre>
1605	(2) The department shall produce a schedule for the
1606	procurement of community-based care lead agencies and provide
1607	the schedule to the community-based care alliances established
1608	pursuant to s. 409.998.
1609	(3) Notwithstanding s. 287.057, the department shall use
1610	5-year contracts with lead agencies.
1611	(4) In order to serve as a lead agency, an entity must:
1612	(a) Be organized as a Florida corporation or a
1613	governmental entity.
1614	(b) Be governed by a board of directors. The membership
1615	of the board of directors must be described in the bylaws or
1616	articles of incorporation of each lead agency, which must
1617	provide that at least 75 percent of the membership of the board
1618	of directors must be composed of persons residing in this state,
1619	and at least 51 percent of the state residents on the board of
1620	directors must reside within the service area of the lead
1621	agency. However, for procurements of lead agency contracts
1622	initiated on or after July 1, 2014:
1623	1. At least 75 percent of the membership of the board of
1624	directors must be persons residing in this state, and at least

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51 percent of the membership of the board of directors must be

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persons residing within the service area of the lead agency.

- 2. The board of directors' powers must include hiring the lead agency's executive director, approving the lead agency's budget, and setting the lead agency's operational policy and procedures.
- 3. The membership of the board of directors must be described in the bylaws or articles of incorporation of each lead agency and require representation from throughout the service area of the lead agency and, at a minimum, from local government, law enforcement, a school district, a children's services council if one operates in the service area, and the United Way or other local funding organization.
- (c) Demonstrate financial responsibility through an organized plan for regular fiscal audits and the posting of a performance bond.
- (5) The department's procurement team procuring any lead agencies' contracts must include individuals from the community alliance in the area to be served under the contract. All meetings at which vendors make presentations to or negotiate with the procurement team shall be held in the area to be served by the contract.
- Section 23. Section 409.988, Florida Statutes, is created to read:
- 409.988 Lead agency duties; general provisions.-
- (1) DUTIES.—A lead agency:

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- (a) Shall serve all children referred as a result of a report of abuse, neglect, or abandonment to the department's child abuse hotline regardless of the level of funding allocated to the lead agency by the state if all related funding is transferred.
- (b) Shall provide accurate and timely information necessary for oversight by the department pursuant to the child welfare results-oriented accountability system required by s. 409.997.
- (c) Shall follow the financial guidelines developed by the department and provide for a regular independent auditing of its financial activities. Such financial information shall be provided to the community-based care alliance established under s. 409.998.
- (d) Shall prepare all judicial reviews, case plans, and other reports necessary for court hearings for dependent children, except those related to the investigation of a referral from the department's child abuse hotline, and shall provide testimony as required for dependency court proceedings. This duty does not include the preparation of legal pleadings or other legal documents, which remain the responsibility of the department.
- (e) Shall ensure that all individuals providing care for dependent children receive appropriate training and meet the minimum employment standards established by the department.

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(f) Shal	ll mainta	ain el	ligibility	to	receive	all	available
federal	child	welfare	funds	5.				

- (g) Shall maintain written agreements with Healthy
 Families Florida lead entities in its service area pursuant to
 s. 409.153 to promote cooperative planning for the provision of
 prevention and intervention services.
- (h) Shall comply with federal and state statutory requirements and agency rules in the provision of contractual services.
- (i) May subcontract for the provision of services required by the contract with the lead agency and the department; however, the subcontracts must specify how the provider will contribute to the lead agency meeting the performance standards established pursuant to the child welfare results-oriented accountability system required by s. 409.997.
 - (2) LICENSURE.-
- (a) A lead agency must be licensed as a child-caring or child-placing agency by the department under this chapter.
- (b) Each foster home, therapeutic foster home, emergency shelter, or other placement facility operated by the lead agency must be licensed by the department under chapter 402 or this chapter.
- (c) Substitute care providers who are licensed under s.

 409.175 and who have contracted with a lead agency are also
 authorized to provide registered or licensed family day care

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1701 under s. 402.313 if such care is consistent with federal law and
1702 if the home has met the requirements of s. 402.313.

- (d) In order to eliminate or reduce the number of duplicate inspections by various program offices, the department shall coordinate inspections required for licensure of agencies under this subsection.
- (e) The department may adopt rules to administer this subsection.
- (3) SERVICES.—A lead agency must serve dependent children through services that are supported by research or are best child welfare practices. The agency may also provide innovative services such as family-centered, cognitive-behavioral interventions designed to mitigate out-of-home placements.
 - (4) LEAD AGENCY ACTING AS GUARDIAN.
- (a) If a lead agency or other provider has accepted case management responsibilities for a child who is sheltered or found to be dependent and who is assigned to the care of the lead agency or other provider, the agency or provider may act as the child's guardian for the purpose of registering the child in school if a parent or guardian of the child is unavailable and his or her whereabouts cannot reasonably be ascertained.
- (b) The lead agency or other provider may also seek emergency medical attention for the child, but only if a parent or guardian of the child is unavailable, the parent's whereabouts cannot reasonably be ascertained, and a court order

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for such emergency medical services cannot be obtained because of the severity of the emergency or because it is after normal working hours.

- (c) A lead agency or other provider may not consent to sterilization, abortion, or termination of life support.
- 1731 (d) If a child's parents' rights have been terminated, the
 1732 lead agency shall act as guardian of the child in all
 1733 circumstances.

Section 24. Section 409.990, Florida Statutes, is created to read:

- 409.990 Funding for lead agencies.—A contract established between the department and a lead agency must be funded by a grant of general revenue, other applicable state funds, or applicable federal funding sources.
- (1) The method of payment for a fixed-price contract with a lead agency must provide for a 2-month advance payment at the beginning of each fiscal year and equal monthly payments thereafter.
- (2) Notwithstanding s. 215.425, all documented federal funds earned for the current fiscal year by the department and lead agencies which exceed the amount appropriated by the Legislature shall be distributed to all entities that contributed to the excess earnings based on a schedule and methodology developed by the department and approved by the Executive Office of the Governor.

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	(a)	Di	stribu	ution	sha	all	be	pro	rata	based	on	total	ea	arnings
and	shall	be	made	only	to	the	ose	enti	ties	that	cont	tribut	ed	to
excess earnings.														

- (b) Excess earnings of lead agencies shall be used only in the service district in which they were earned.
- (c) Additional state funds appropriated by the Legislature for lead agencies or made available pursuant to the budgetary amendment process described in s. 216.177 shall be transferred to the lead agencies.
- (d) The department shall amend a lead agency's contract to permit expenditure of the funds.
- (3) Notwithstanding other provisions in this section, the amount of the annual contract for a lead agency may be increased by excess federal funds earned in accordance with s. 216.181(11).
- (4) Each contract with a lead agency shall provide for the payment by the department to the lead agency of a reasonable administrative cost in addition to funding for the provision of services.
- (5) A lead agency may carry forward documented unexpended state funds from one fiscal year to the next; however, the cumulative amount carried forward may not exceed 8 percent of the total contract. Any unexpended state funds in excess of that percentage must be returned to the department.
 - (a) The funds carried forward may not be used in any way

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that would create increased recurring future obligations, and such funds may not be used for any type of program or service that is not currently authorized by the existing contract with the department.

- (b) Expenditures of funds carried forward must be separately reported to the department.
- (c) Any unexpended funds that remain at the end of the contract period shall be returned to the department.
- (d) Funds carried forward may be retained through any contract renewals and any new procurements as long as the same lead agency is retained by the department.
- services and local participation in community-based care initiatives by fostering community support and providing enhanced prevention and in-home services, thereby reducing the risk otherwise faced by lead agencies. There is established a community partnership matching grant program to be operated by the department for the purpose of encouraging local participation in community-based care for child welfare. A community-based care alliance direct-support organization, a children's services council, or another local entity that makes a financial commitment to a community-based care lead agency may be eligible for a matching grant. The total amount of the local contribution may be matched on a one-to-one basis up to a maximum annual amount of \$500,000 per lead agency. Awarded

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matching grant funds may be used for any prevention or in-home services that can be reasonably expected to reduce the number of children entering the child welfare system. Funding available for the matching grant program is subject to legislative appropriation of nonrecurring funds provided for this purpose.

- (7) (a) The department, in consultation with the Florida

 Coalition for Children, Inc., shall develop and implement a

 community-based care risk pool initiative to mitigate the

 financial risk to eligible lead agencies. This initiative must

 include:
- 1. A risk pool application and protocol developed by the department which outlines submission criteria, including, but not limited to, financial and program management, descriptive data requirements, and timeframes for submission of applications. Requests for funding from risk pool applicants shall be based on relevant and verifiable service trends and changes that have occurred during the current fiscal year. The application shall confirm that expenditure of approved risk pool funds by the lead agency shall be completed within the current fiscal year.
- 2. A risk pool peer review committee, appointed by the secretary and consisting of department staff and representatives from at least three nonapplicant lead agencies, which reviews and assesses all risk pool applications. Upon completion of each application review, the peer review committee shall report its

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findings and recommendations to the secretary providing, at a minimum, the following information:

- a. Justification for the specific funding amount required by the risk pool applicant based on current year service trend data, including validation that the applicant's financial need was caused by circumstances beyond the control of the lead agency management;
- b. Verification that the proposed use of risk pool funds meets at least one of the criteria in paragraph (c); and
- c. Evidence of technical assistance provided in an effort to avoid the need to access the risk pool and recommendations for technical assistance to the lead agency to ensure that risk pool funds are expended effectively and that the agency's need for future risk pool funding is diminished.
- (b) Upon approval by the secretary of a risk pool application, the department may request funds from the risk pool in accordance with s. 216.181(6)(a).
- (c) The purposes for which the community-based care risk pool shall be used include:
- 1. Significant changes in the number or composition of clients eligible to receive services.
- 2. Significant changes in the services that are eligible for reimbursement.
- 1849 3. Continuity of care in the event of failure,

 1850 discontinuance of service, or financial misconduct by a lead

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1851 agency.

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- 4. Significant changes in the mix of available funds.
- (d) The department may also request in its annual legislative budget request, and the Governor may recommend, that the funding necessary to carry out paragraph (c) be appropriated to the department. In addition, the department may request the allocation of funds from the community-based care risk pool in accordance with s. 216.181(6)(a). Funds from the pool may be used to match available federal dollars.
- 1. Such funds shall constitute partial security for contract performance by lead agencies and shall be used to offset the need for a performance bond.
- 2. The department may separately require a bond to mitigate the financial consequences of potential acts of malfeasance or misfeasance or criminal violations by the provider.

Section 25. Section 409.16713, Florida Statutes, is transferred, renumbered as section 409.991, Florida Statutes, and paragraph (a) of subsection (1) of that section is amended, to read:

- 409.991 409.16713 Allocation of funds for community-based care lead agencies.—
 - (1) As used in this section, the term:
- 1874 (a) "Core services funding" means all funds allocated to
 1875 community-based care lead agencies operating under contract with

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the department pursuant to $\underline{s.\ 409.987}$ $\underline{s.\ 409.1671}$, with the following exceptions:

- 1. Funds appropriated for independent living;
- 2. Funds appropriated for maintenance adoption subsidies;
- 3. Funds allocated by the department for protective investigations training;
- 1882 4. Nonrecurring funds;

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- 1883 5. Designated mental health wrap-around services funds;
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 - 6. Funds for special projects for a designated community-based care lead agency.
 - Section 26. Section 409.992, Florida Statutes, is created to read:
 - 409.992 Lead agency expenditures.
 - (1) The procurement of commodities or contractual services by lead agencies shall be governed by the financial guidelines developed by the department which comply with applicable state and federal law and follow good business practices. Pursuant to s. 11.45, the Auditor General may provide technical advice in the development of the financial guidelines.
 - (2) Notwithstanding any other provision of law, a community-based care lead agency may make expenditures for staff cellular telephone allowances, contracts requiring deferred payments and maintenance agreements, security deposits for office leases, related agency professional membership dues other

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than personal professional membership dues, promotional materials, and grant writing services. Expenditures for food and refreshments, other than those provided to clients in the care of the agency or to foster parents, adoptive parents, and caseworkers during training sessions, are not allowable.

(3) A lead community-based care agency and its subcontractors are exempt from state travel policies as provided in s. 112.061(3)(a) for their travel expenses incurred in order to comply with the requirements of this section.

Section 27. Section 409.993, Florida Statutes, is created to read:

409.993 Lead agencies and subcontractor liability.-

(1) FINDINGS.-

(a) The Legislature finds that the state has traditionally provided foster care services to children who have been the responsibility of the state. As such, foster children have not had the right to recover for injuries beyond the limitations specified in s. 768.28. The Legislature has determined that foster care and related services need to be outsourced pursuant to this section and that the provision of such services is of paramount importance to the state. The purpose for such outsourcing is to increase the level of safety, security, and stability of children who are or become the responsibility of the state. One of the components necessary to secure a safe and stable environment for such children is that private providers

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maintain liability insurance. As such, insurance needs to be available and remain available to nongovernmental foster care and related services providers without the resources of such providers being significantly reduced by the cost of maintaining such insurance.

- (b) The Legislature further finds that, by requiring the following minimum levels of insurance, children in outsourced foster care and related services will gain increased protection and rights of recovery in the event of injury than provided for in s. 768.28.
- (2) LEAD AGENCY LIABILITY.-
 - (a) Other than an entity to which s. 768.28 applies, an eligible community-based care lead agency, or its employees or officers, except as otherwise provided in paragraph (b), must, as a part of its contract, obtain a minimum of \$1 million per claim/\$3 million per incident in general liability insurance coverage. The eligible community-based care lead agency must also require that staff who transport client children and families in their personal automobiles in order to carry out their job responsibilities obtain minimum bodily injury liability insurance in the amount of \$100,000 per claim, \$300,000 per incident, on their personal automobiles. In lieu of personal motor vehicle insurance, the lead agency's casualty, liability, or motor vehicle insurance carrier may provide nonowned automobile liability coverage. Such insurance provides

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liability insurance for automobiles that the provider uses in connection with the agency's business but does not own, lease, rent, or borrow. Such coverage includes automobiles owned by the employees of the lead agency or a member of the employee's household but only while the automobiles are used in connection with the agency's business. The nonowned automobile coverage for the lead agency applies as excess coverage over any other collectible insurance. The personal automobile policy for the employee of the lead agency must be primary insurance, and the nonowned automobile coverage of the agency acts as excess insurance to the primary insurance. The lead agency shall provide a minimum limit of \$1 million in nonowned automobile coverage. In a tort action brought against such an eligible community-based care lead agency or employee, net economic damages shall be limited to \$1 million per liability claim and \$100,000 per automobile claim, including, but not limited to, past and future medical expenses, wage loss, and loss of earning capacity, offset by any collateral source payment paid or payable. In any tort action brought against such an eligible community-based care lead agency, noneconomic damages shall be limited to \$200,000 per claim. A claims bill may be brought on behalf of a claimant pursuant to s. 768.28 for any amount exceeding the limits specified in this paragraph. Any offset of collateral source payments made as of the date of the settlement or judgment shall be in accordance with s. 768.76. The

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community-based care lead agency is not liable in tort for the acts or omissions of its subcontractors or the officers, agents, or employees of its subcontractors.

The liability of an eligible community-based care lead agency described in this section shall be exclusive and in place of all other liability of such lead agency. The same immunities from liability enjoyed by such lead agencies shall extend as well to each employee of the lead agency when such employee is acting in furtherance of the agency's business, including the transportation of clients served, as described in this subsection, in privately owned vehicles. Such immunities are not applicable to a lead agency or an employee who acts in a culpably negligent manner or with willful and wanton disregard or unprovoked physical aggression if such acts result in injury or death or such acts proximately cause such injury or death. Such immunities are not applicable to employees of the same lead agency when each is operating in the furtherance of the agency's business, but they are assigned primarily to unrelated work within private or public employment. The same immunity provisions enjoyed by a lead agency also apply to any sole proprietor, partner, corporate officer or director, supervisor, or other person who in the course and scope of his or her duties acts in a managerial or policymaking capacity and the conduct that caused the alleged injury arose within the course and scope of those managerial or policymaking duties. As used in this

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subsection and subsection (3), the term "culpable negligence" means reckless indifference or grossly careless disregard of human life.

(3) SUBCONTRACTOR LIABILITY.-

A subcontractor of an eligible community-based care lead agency which is a direct provider of foster care and related services to children and families, and its employees or officers, except as otherwise provided in paragraph (b), must, as a part of its contract, obtain a minimum of \$1 million per claim/\$3 million per incident in general liability insurance coverage. The subcontractor of an eligible community-based care lead agency must also require that staff who transport client children and families in their personal automobiles in order to carry out their job responsibilities obtain minimum bodily injury liability insurance in the amount of \$100,000 per claim, \$300,000 per incident, on their personal automobiles. In lieu of personal motor vehicle insurance, the subcontractor's casualty, liability, or motor vehicle insurance carrier may provide nonowned automobile liability coverage. Such insurance provides liability insurance for automobiles that the subcontractor uses in connection with the subcontractor's business but does not own, lease, rent, or borrow. Such coverage includes automobiles owned by the employees of the subcontractor or a member of the employee's household but only while the automobiles are used in connection with the subcontractor's business. The nonowned

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automobile coverage for the subcontractor applies as excess coverage over any other collectible insurance. The personal automobile policy for the employee of the subcontractor shall be primary insurance, and the nonowned automobile coverage of the subcontractor acts as excess insurance to the primary insurance. The subcontractor shall provide a minimum limit of \$1 million in nonowned automobile coverage. In a tort action brought against such subcontractor or employee, net economic damages shall be limited to \$1 million per liability claim and \$100,000 per automobile claim, including, but not limited to, past and future medical expenses, wage loss, and loss of earning capacity, offset by any collateral source payment paid or payable. In a tort action brought against such subcontractor, noneconomic damages shall be limited to \$200,000 per claim. A claims bill may be brought on behalf of a claimant pursuant to s. 768.28 for any amount exceeding the limits specified in this paragraph. Any offset of collateral source payments made as of the date of the settlement or judgment shall be in accordance with s. 768.76. The liability of a subcontractor of an eligible (b)

(b) The liability of a subcontractor of an eligible community-based care lead agency that is a direct provider of foster care and related services as described in this section shall be exclusive and in place of all other liability of such lead agency. The same immunities from liability enjoyed by such subcontractor provider shall extend as well to each employee of the subcontractor when such employee is acting in furtherance of

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the subcontractor's business, including the transportation of clients served, as described in this subsection, in privately owned vehicles. Such immunities are not applicable to a subcontractor or an employee who acts in a culpably negligent manner or with willful and wanton disregard or unprovoked physical aggression when such acts result in injury or death or such acts proximately cause such injury or death. Such immunities are not applicable to employees of the same subcontractor when each is operating in the furtherance of the subcontractor's business, but they are assigned primarily to unrelated works within private or public employment. The same immunity provisions enjoyed by a subcontractor also apply to any sole proprietor, partner, corporate officer or director, supervisor, or other person who in the course and scope of his or her duties acts in a managerial or policymaking capacity and the conduct that caused the alleged injury arose within the course and scope of those managerial or policymaking duties.

Section 28. Section 409.1675, Florida Statutes, is transferred and renumbered as section 409.994, Florida Statutes, and amended to read:

409.994 409.1675 Lead Community-based care lead agencies providers; receivership.—

(1) The Department of Children and $\frac{\text{Families}}{\text{Family}}$ Services may petition a court of competent jurisdiction for the appointment of a receiver for a $\frac{\text{Lead}}{\text{Lead}}$ community-based $\frac{\text{Lead}}{\text{Lead}}$

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agency provider established pursuant to $\underline{s. 409.987}$ if $\underline{s. 409.1671}$ when any of the following conditions exist:

- (a) The lead <u>agency</u> community-based provider is operating without a license as a child-placing agency.
- (b) The lead <u>agency</u> community-based provider has given less than 120 days' notice of its intent to cease operations, and arrangements have not been made for another lead <u>agency</u> community-based provider or for the department to continue the uninterrupted provision of services.
- (c) The department determines that conditions exist in the lead <u>agency community-based provider</u> which present an imminent danger to the health, safety, or welfare of the dependent children under that <u>agency's provider's</u> care or supervision. Whenever possible, the department shall make a reasonable effort to facilitate the continued operation of the program.
- (d) The lead <u>agency community-based provider</u> cannot meet its current financial obligations to its employees, contractors, or foster parents. Issuance of bad checks or the existence of delinquent obligations for payment of salaries, utilities, or invoices for essential services or commodities shall constitute prima facie evidence that the lead <u>agency community-based</u> provider lacks the financial ability to meet its financial obligations.
- (2) (a) The petition for receivership shall take precedence over other court business unless the court determines that some

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other pending proceeding, having statutory precedence, has priority.

- (b) A hearing shall be conducted within 5 days after the filing of the petition, at which time interested parties shall have the opportunity to present evidence as to whether a receiver should be appointed. The department shall give reasonable notice of the hearing on the petition to the lead agency community-based provider.
- (c) The court shall grant the petition upon finding that one or more of the conditions in subsection (1) exists and the continued existence of the condition or conditions jeopardizes the health, safety, or welfare of dependent children. A receiver may be appointed ex parte when the court determines that one or more of the conditions in subsection (1) exists. After such finding, the court may appoint any person, including an employee of the department who is qualified by education, training, or experience to carry out the duties of the receiver pursuant to this section, except that the court may shall not appoint any member of the governing board or any officer of the lead agency community-based provider. The receiver may be selected from a list of persons qualified to act as receivers which is developed by the department and presented to the court with each petition of receivership.
- (d) A receiver may be appointed for up to 90 days, and the department may petition the court for additional 30-day

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extensions. Sixty days after appointment of a receiver and every 30 days thereafter until the receivership is terminated, the department shall submit to the court an assessment of the lead agency's community-based provider's ability to ensure the health, safety, and welfare of the dependent children under its supervision.

- (3) The receiver shall take such steps as are reasonably necessary to ensure the continued health, safety, and welfare of the dependent children under the supervision of the lead <u>agency community-based provider</u> and shall exercise those powers and perform those duties set out by the court, including, but not limited to:
- (a) Taking such action as is reasonably necessary to protect or conserve the assets or property of the lead <u>agency</u> community-based provider. The receiver may use the assets and property and any proceeds from any transfer thereof only in the performance of the powers and duties <u>provided</u> set forth in this section and by order of the court.
- (b) Using the assets of the lead <u>agency</u> community-based provider in the provision of care and services to dependent children.
- (c) Entering into contracts and hiring agents and employees to carry out the powers and duties of the receiver under this section.
 - (d) Having full power to direct, manage, hire, and

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discharge employees of the lead <u>agency</u> community-based provider. The receiver shall hire and pay new employees at the rate of compensation, including benefits, approved by the court.

- (e) Honoring all leases, mortgages, and contractual obligations of the lead <u>agency</u> community-based provider, but only to the extent of payments that become due during the period of the receivership.
- (4)(a) The receiver shall deposit funds received in a separate account and shall use this account for all disbursements.
- (b) A payment to the receiver of any sum owing to the lead <u>agency community-based provider</u> shall discharge any obligation to the provider to the extent of the payment.
- (5) A receiver may petition the court for temporary relief from obligations entered into by the lead <u>agency community-based</u> provider if the rent, price, or rate of interest required to be paid under the agreement was substantially in excess of a reasonable rent, price, or rate of interest at the time the contract was entered into, or if any material provision of the agreement was unreasonable when compared to contracts negotiated under similar conditions. Any relief in this form provided by the court shall be limited to the life of the receivership, unless otherwise determined by the court.
- (6) The court shall set the compensation of the receiver, which shall be considered a necessary expense of a receivership

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and may grant to the receiver such other authority necessary to ensure the health, safety, and welfare of the children served.

- (7) A receiver may be held liable in a personal capacity only for the receiver's own gross negligence, intentional acts, or breaches of fiduciary duty. This section <u>may shall</u> not be interpreted to be a waiver of sovereign immunity should the department be appointed receiver.
- (8) If the receiver is not the department, the court may require a receiver to post a bond to ensure the faithful performance of these duties.
 - (9) The court may terminate a receivership when:
- (a) The court determines that the receivership is no longer necessary because the conditions that gave rise to the receivership no longer exist; or
- (b) The department has entered into a contract with a new lead $\underline{\text{agency community-based provider}}$ pursuant to $\underline{\text{s. 409.987}}$ $\underline{\text{s. 409.1671}}$, and that contractor is ready and able to assume the duties of the previous lead agency $\underline{\text{provider}}$.
- (10) Within 30 days after the termination, unless this time period is extended by the court, the receiver shall give the court a complete accounting of all property of which the receiver has taken possession, of all funds collected and disbursed, and of the expenses of the receivership.
- (11) Nothing in This section does not shall be construed to relieve any employee of the lead agency community-based

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provider placed in receivership of any civil or criminal liability incurred, or any duty imposed by law, by reason of acts or omissions of the employee before prior to the appointment of a receiver, and; nor shall anything contained in this section does not be construed to suspend during the receivership any obligation of the employee for payment of taxes or other operating or maintenance expenses of the lead agency community-based provider or for the payment of mortgages or liens. The lead agency community-based provider shall retain the right to sell or mortgage any facility under receivership, subject to the prior approval of the court that ordered the receivership.

Section 29. Section 409.996, Florida Statutes, is created to read:

409.996 Duties of the Department of Children and Families.—The department shall contract for the delivery, administration, or management of care for children in the child protection and child welfare system. In doing so, the department retains responsibility for the quality of contracted services and programs and shall ensure that services are delivered in accordance with applicable federal and state statutes and regulations.

(1) The department shall enter into contracts with lead agencies to perform the duties of a lead agency pursuant to s. 409.988. At a minimum, the contracts must:

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- (a) Provide for the services needed to accomplish the duties established in s. 409.988 and provide information to the department which is necessary to meet the requirements for a quality assurance program pursuant to subsection (18) and the child welfare results-oriented accountability system pursuant to s. 409.997.
- (b) Provide for graduated penalties for failure to comply with contract terms. Such penalties may include financial penalties, enhanced monitoring and reporting, corrective action plans, and early termination of contracts or other appropriate action to ensure contract compliance.
- (c) Ensure that the lead agency shall furnish current and accurate information on its activities in all cases in client case records in the state's statewide automated child welfare information system.
- (d) Specify the procedures to be used by the parties to resolve differences in interpreting the contract or to resolve disputes as to the adequacy of the parties' compliance with their respective obligations under the contract.
- (2) The department must adopt written policies and procedures for monitoring the contract for delivery of services by lead agencies. These policies and procedures must, at a minimum, address the evaluation of fiscal accountability and program operations, including provider achievement of performance standards, provider monitoring of subcontractors,

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and timely follow up of corrective actions for significant monitoring findings related to providers and subcontractors.

These policies and procedures must also include provisions for reducing the duplication of the department's program monitoring activities both internally and with other agencies, to the extent possible. The department's written procedures must ensure that the written findings, conclusions, and recommendations from monitoring the contract for services of lead agencies are communicated to the director of the provider agency and the community-based care alliance as expeditiously as possible.

- (3) The department shall receive federal and state funds as appropriated for the operation of the child welfare system and shall transmit these funds to the lead agencies as agreed. The department retains responsibility for the appropriate spending of these funds. The department shall monitor lead agencies to assess compliance with the financial guidelines established pursuant to s. 409.992 and other applicable state and federal laws.
- (4) The department shall provide technical assistance and consultation to lead agencies in the provision of care to children in the child protection and child welfare system.
- (5) The department retains the responsibility for the review, approval or denial, and issuances of all foster home licenses.
 - (6) The department shall process all applications

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submitted by lead agencies for the Interstate Compact for Placement of Children and the Interstate Compact for Adoption and Medical Assistance.

- (7) The department shall assist lead agencies with access to and coordination with other service programs within the department.
- (8) The department shall determine Medicaid eligibility for all referred children and will coordinate services with the Agency for Health Care Administration.
- (9) The department shall develop, in cooperation with the lead agencies, a standardized competency-based curriculum for certification training and for administering the certification testing program for child protection staff.
- (10) The department shall maintain the statewide adoptions website and provide information and training to the lead agencies relating to the website.
- (11) The department shall provide training and assistance to lead agencies regarding the responsibility of lead agencies relating to children receiving supplemental security income, social security, railroad retirement, or veterans' benefits.
- (12) With the assistance of a lead agency, the department shall develop and implement statewide and local interagency agreements needed to coordinate services for children and parents involved in the child welfare system who are also involved with the Agency for Persons with Disabilities, the

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Department of Juvenile Justice, the Department of Education, the Department of Health, and other governmental organizations that share responsibilities for children or parents in the child welfare system.

- (13) With the assistance of a lead agency, the department shall develop and implement a working agreement between the lead agency and the substance abuse and mental health managing entity to integrate services and supports for children and parents serviced in the child welfare system.
- (14) The department shall work with the Agency for Health Care Administration to provide each child the services of the Medicaid early and periodic screening, diagnosis, and treatment entitlement including 72-hour screening, periodic child health checkups, and prescribed follow up for ordered services, including medical, dental, and vision care.
- (15) The department shall assist lead agencies in developing an array of services in compliance with the Title IV-E Waiver and shall monitor the provision of those services.
- (16) The department shall provide a mechanism to allow lead agencies to request a waiver of department policies and procedures that create inefficiencies or inhibit the performance of the lead agency duties.
- (17) The department shall directly or through contract provide attorneys to prepare and present cases in dependency court and shall ensure that the court is provided with adequate

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information for informed decisionmaking in dependency cases, including a fact sheet for each case which lists the names and contact information for any child protective investigator, child protective investigation supervisor, case manager, case manager supervisor, and the regional department official responsible for the lead agency contract. For the Sixth Judicial Circuit, the department shall contract with the state attorney for the provision of these services.

- (18) The department, in consultation with lead agencies, shall establish a quality assurance program for contracted services to dependent children. The quality assurance program shall be based on standards established by federal and state law and national accrediting organizations.
- (a) The department must evaluate each lead agency under contract at least annually. These evaluations shall cover the programmatic, operational, and fiscal operations of the lead agency and be consistent with the child welfare results-oriented accountability system pursuant to s. 409.997. The department must consult with the chief judge on the performance of the lead agency.
- (b) The department shall, to the extent possible, use independent financial audits provided by the lead agency to eliminate or reduce the ongoing contract and administrative reviews conducted by the department. If the department determines that such independent financial audits are

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2351	inadequate, other audits, as necessary, may be conducted by the
2352	department. This paragraph does not abrogate the requirements of
2353	s. 215.97.
2354	(c) The department may suggest additional items to be
2355	included in such independent financial audits to meet the

- (d) The department may outsource programmatic, administrative, or fiscal monitoring oversight of lead agencies.
- (e) A lead agency must assure that all subcontractors are subject to the same quality assurance activities as the lead agency.

Section 30. Section 409.997, Florida Statutes, is created to read:

409.997 Child welfare results-oriented accountability system.—

- (1) The department and its contract providers, including lead agencies, community-based care providers, and other community partners participating in the state's child protection and child welfare system, share the responsibility for achieving the outcome goals specified in s. 409.986(2).
- (2) In order to assess the achievement of the goals specified in s. 409.986(2), the department shall maintain a comprehensive, results-oriented accountability system that monitors the use of resources, the quality and amount of services provided, and child and family outcomes through data

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department's needs.

analysis, research review, evaluation, and quality improvement.

The system shall provide information about individual entities'

performance as well as the performance of groups of entities

working together as an integrated system of care on a local,

regional, and statewide basis. In maintaining the

accountability system, the department shall:

- (a) Identify valid and reliable outcome measures for each of the goals specified in this subsection. The outcome data set must consist of a limited number of understandable measures using available data to quantify outcomes as children move through the system of care. Such measures may aggregate multiple variables that affect the overall achievement of the outcome goal. Valid and reliable measures must be based on adequate sample sizes, be gathered over suitable time periods, reflect authentic rather than spurious results, and may not be susceptible to manipulation.
- (b) Implement a monitoring system to track the identified outcome measures on a statewide, regional, and provider-specific basis. The monitoring system must identify trends and chart progress toward achievement of the goals specified in this section. The requirements of the monitoring system may be incorporated into the quality assurance system required under s. 409.996(18).
- (c) Develop and maintain an analytical system that builds on the outcomes monitoring system to assess the statistical

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validity of observed associations between child welfare interventions and the measured outcomes. The analysis must use quantitative methods to adjust for variations in demographic or other conditions. The analysis must include longitudinal studies to evaluate longer term outcomes such as continued safety, family permanence, and transition to self-sufficiency. The analysis may also include qualitative research methods to provide insight into statistical patterns.

- (d) Develop and maintain a program of research review to identify interventions that are supported by evidence as causally linked to improved outcomes.
- (e) Support an ongoing process of evaluation to determine the efficacy and effectiveness of various interventions.

 Efficacy evaluation is intended to determine the validity of a causal relationship between an intervention and an outcome.

 Effectiveness evaluation is intended to determine the extent to which the results can be generalized.
- (f) Develop and maintain an inclusive, interactive, and evidence-supported program of quality improvement which promotes individual skill building as well as organizational learning.
- (g) Develop and implement a method for making the results of the accountability system transparent for all parties involved in the child welfare system as well as policymakers and the public. The presentation shall provide a comprehensible, visual report card for the state and each community-based care

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region, indicating the current status relative to each goal and trends in that status over time. The presentation shall identify and report outcome measures which assess the performance of the department, community-based care lead agency, and its subcontractors working together as an integrated system of care.

- (3) The department shall establish a technical advisory panel consisting of representatives from the Florida Institute for Child Welfare established pursuant to s. 1004.615, lead agencies, community-based care providers, other contract providers, community-based care alliances, and family representatives. The President of the Senate and the Speaker of the House of Representatives shall each appoint a member to serve as a legislative liaison to the panel. The technical advisory panel shall advise the department on meeting the requirements of this section.
- (4) The accountability system may not rank or compare performance among community-based care regions unless adequate and specific adjustments are adopted which account for the diversity in regions' demographics, resources, and other relevant characteristics.
- (5) The results of the accountability system must provide the basis for performance incentives if funds for such payments are made available through the General Appropriations Act.
 - (6) At least quarterly, the department shall make the

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results of the accountability system available to the public through publication on its website. The website must allow for custom searches of the performance data.

the statewide and individual community-based care lead agency results for child protection and child welfare systems. The department shall use the accountability system and consult with the community-based care alliance and the chief judge or judges in the community-based care service area to prepare the report to the Governor, the President of the Senate, and the Speaker of the House of Representatives.

Section 31. Section 409.998, Florida Statutes, is created to read:

409.998 Community-based care oversight by community alliances.—

- (1) To provide independent, community-focused oversight of child protection and child welfare services and the local system of community-based care, community alliances created in s.

 20.19(5), shall, with the assistance of the department, perform the following duties:
- (a) Conduct a needs assessment and establishment of community priorities for child protection and child welfare services.
- 2474 (b) Review the performance of the department, sheriff's 2475 office if the office provides child protective services, and

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lead agency individually and as an integrated system of care,
and advise the department, sheriff's office if applicable, and
lead agency regarding concerns and suggested areas of
improvement.

- (c) Recommend a competitive procurement for the lead agency if programmatic or financial performance is poor. The community alliance shall make recommendations on the development of the procurement document for such competitive procurement and may suggest specific requirements relating to local needs and services.
- (d) Recommend a contract extension for the lead agency if programmatic or financial performance is superior.

(e)

- (f) In partnership with the Florida Institute for Child Welfare established under s. 1004.615, develop recommendations to the department and the community-based care lead agency to improve child protection and child welfare policies and practices.
- (g) Promote greater community involvement in community-based care through participation in community-based care lead agency services and activities, solicitation of local financial and in-kind resources, recruitment and retention of community volunteers, and public awareness efforts.
- (9) (a) Authority to create a direct-support organization.—

 The alliance is authorized to create a direct-support

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organization.

- 1. The direct-support organization must be a Florida corporation, not for profit, incorporated under the provisions of chapter 617. The direct-support organization shall be exempt from paying fees under s. 617.0122.
- 2. The direct-support organization shall be organized and operated to conduct programs and activities; raise funds; request and receive grants, gifts, and bequests of moneys; acquire, receive, hold, invest, and administer, in its own name, securities, funds, objects of value, or other property, real or personal; and make expenditures to or for the direct or indirect benefit of the lead agency.
- 3. The department is not authorized to provide support in the form of funding or staff time for the direct-support organizations created pursuant to this subsection.
- 3. If the Secretary of Children and Families determines that the direct-support organization is operating in a manner that is inconsistent with the goals and purposes of community-based care or not acting in the best interest of the community, the secretary may terminate the contract and thereafter the organization may not use the name of the community-based care alliance.
- (b) Contract.—The direct-support organization shall operate under a written contract with the department. The written contract must, at a minimum, provide for:

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- 1. Approval of the articles of incorporation and bylaws of the direct-support organization by the secretary.
- 2. Submission of an annual budget for the approval by the secretary or his or her designee.
- 3. The reversion without penalty to the department of all moneys and property held in trust by the direct-support organization for the community-based care alliance if the direct-support organization ceases to exist or if the contract is terminated.
- 4. The fiscal year of the direct-support organization, which must begin July 1 of each year and end June 30 of the following year.
- 5. The disclosure of material provisions of the contract and the distinction between the community-based care alliance and the direct-support organization to donors of gifts, contributions, or bequests, as well as on all promotional and fundraising publications.
- (c) Board of directors.—The secretary or his or her designee shall appoint a board of directors for the direct—support organization. The secretary or his or her designee may designate members of the alliance and the lead agency to serve on the board of directors. An employee of the department may not serve on the board of directors. Members of the board shall serve at the pleasure of the secretary or his or her designee.

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2551	(e) Moneys.—Moneys of the direct-support organization may
2552	be held in a separate depository account in the name of the
2553	direct-support organization and subject to the provisions of the
2554	contract with the department.
2555	(f) Annual audit.—The direct-support organization shall
2556	provide for an annual financial audit in accordance with s.
2557	<u>215.981.</u>
2558	(g) Limits on the direct-support organization.—The direct-
2559	support organization may not exercise any power under s.
2560	617.0302(12) or (16). (h) Repeal.—The authority to create a
2561	direct-support organization expires October 1, 2019, unless
2562	saved from repeal by reenactment by the Legislature.
2563	(10) All alliance meetings are open to the public pursuant
2564	to s. 286.011 and the public records provision of s. 119.07(1).
2565	Section 32. Section 827.10, Florida Statutes, is created to
2566	read:
2567	827.10 Unlawful abandonment of a child
2568	(1) As used in this section, the term:
2569	(a) "Abandons" or "abandonment" means to leave a child in
2570	a place or with a person other than a relative with the intent
2571	not to return to the child and with the intent not to provide
2572	for the care of the child.

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not limited to, food, nutrition, clothing, shelter, supervision,

(b) "Care" means support and services necessary to

maintain the child's physical and mental health, including, but

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2576	medicine, and medical services that a prudent person would
2577	consider essential for the well-being of the child.
2578	(c) "Caregiver" has the same meaning as provided in s.
2579	39.01(10).
2580	(d) "Child" means a child for whose care the caregiver is
2581	legally responsible.
2582	(e) "Relative" has the same meaning as provided in s.
2583	39.01(64).
2584	(2) A caregiver who abandons a child under circumstances
2585	in which the caregiver knew or should have known that the
2586	abandonment exposes the child to unreasonable risk of harm
2587	commits a felony of the third degree, punishable as provided in
2588	s. 775.082, s. 775.083, or s. 775.084.
2589	(3) This section does not apply to a person who surrenders
2590	a newborn infant in compliance with s. 383.50.
2591	(4) This section does not preclude prosecution for a
2592	criminal act under any other law, including, but not limited to,
2593	prosecution of child abuse or neglect of a child under s.
2594	827.03.
2595	Section 33. Section 1004.615, Florida Statutes, is created
2596	to read:
2597	1004.615 Florida Institute for Child Welfare
2598	(1) There is established the Florida Institute for Child

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Safety in the Department of Children and Families. The purpose

of the institute is to advance the well-being of children and

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families by improving the performance of child protection and child welfare services through research, policy analysis, evaluation, and leadership development. The institute shall consist of a consortium of public and private universities offering degrees in social work and shall be housed within the College of Social Work of the Florida State University.

- (2) Using such resources as authorized in the General Appropriations Act, the Department of Children and Families shall contract with the institute for performance of the duties described in subsection (4).
- (3) The institute shall work with the department, sheriffs providing child protective investigative services, community—based care lead agencies, community—based care provider organizations, the court system, the Department of Juvenile Justice, and other partners who contribute to and participate in providing child protection and child welfare services.
 - (4) The duties and responsibilities of the institute include the following:
- (a) Maintain a program of research that contributes to scientific knowledge and informs both policy and practice related to child safety, permanency, and child and family wellbeing.
- (b) Advise the department and other organizations

 participating in the child protection and child welfare system

 regarding scientific evidence on policy and practice related to

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child safety, permanency, and child and family well-being.

- (c) Advising about the management practices and administrative processes used by the department and other organizations participating in the child protection and child welfare system and recommend improvements that reduce burdensome, ineffective requirements for frontline staff and their supervisors while enhancing their ability to effectively investigate, analyze, problem-solve, and supervise.
- (d) Assess the performance of child protection and child welfare services based on specific outcome measures.
- (e) Evaluate the scope and effectiveness of preservice and inservice training for child protection and child welfare workers and advise and assist the department in efforts to improve these trainings.
- (f) Assess the readiness of social work graduates to assume job responsibilities in the child protection and child welfare system and identify gaps in education that can be addressed through the modification of curricula or the establishment of industry certifications.
- (g) Develop and maintain a program of professional support including training courses and consulting services that assist both individuals and organizations in implementing adaptive and resilient responses to workplace stress.
- (h) Participate in the department's critical incident response team, assist in the preparation of reports about such

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incidents, and support the committee review of reports and development of recommendations.

- (i) Identify effective policies and promising practices, including but not limited to innovations in coordination between entities participating in the child protection and child welfare system, data analytics, working with the local community, and management of human service organizations and communicate these findings to the department and other organizations participating in the child protection and child welfare system.
- The President of the Florida State University shall (5) appoint a director to the institute. The director must be a child welfare professional with a doctoral degree in social work and hold a faculty appointment in the Florida State University College of Social Work. The institute shall be administered by the director, and the director's office shall be located at the Florida State University. The director is responsible for overall management of the institute and for developing and executing the work of the institute consistent with the responsibilities in subsection (4). The director shall engage individuals in other state universities with accredited colleges of social work to participate in the institute. The universities involved in the institute shall provide facilities, staff, and other resources to the institute to establish statewide access to institute programs and services.
 - (6) By October 1 of each year, the institute shall provide

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a written report to the Governor, the President of the Senate, and the Speaker of the House of Representatives which outlines its activities in the preceding year, reports significant research findings as well as results of other programs, and provides specific recommendations for improving child protection and child welfare services.

The institute or the Florida State University School of Social Work shall convene a task force to make recommendations for improving the state's child welfare system. The task force shall include but not be limited to representatives of the department, the Department of Juvenile Justice, community-based care lead agencies, child welfare services providers, including case management providers, the court system, and advocates. The task force shall include individuals working directly with children and families, administrators, and experts. Individual members of the task force shall be responsible for their own travel expenses. The task force may meet in person, telephonically, through web-based technology, or any combination thereof. The task force shall establish a workgroup which may include additional members with directly relevant experience and expertise to make specific recommendations on reducing paperwork and increasing the retention of case managers. The institute or university shall submit an interim report by February 1, 2015, and a final report by November 1, 2015, to the Governor, the President of the

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Senate, and the Speaker of the House of Representatives.

Section 34. Paragraph (h) is added to subsection (1) of section 1009.25, Florida Statutes, to read:

1009.25 Fee exemptions.

- (1) The following students are exempt from the payment of tuition and fees, including lab fees, at a school district that provides workforce education programs, Florida College System institution, or state university:
- (h) Pursuant to s. 402.403, a child protective investigation or a child protective investigation supervisor employed by the Department of Children and Families or a sheriff's office who is enrolled in an accredited bachelor's degree or master's degree in social work program or completing coursework required pursuant to s. 402.402(2)(a)2., provided that the student attains at least a grade of "B" in all courses for which tuition and fees are exempted.

Section 35. This act shall take effect July 1, 2014.

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